



# PARKING METER REFUND ENQUIRY

ALL FIELDS ARE MANDATORY. INCOMPLETE FORMS MAY NOT BE PROCESSED.

## PERSONAL DETAILS

Please print your **FULL NAME** and **ADDRESS BELOW**. This section must be completed by the person making the declaration.

Surname  Given Names   
Address  Postcode   
Phone No.  Email

## TICKET PURCHASE DETAILS

Meter No.  How much was paid   
Date/Time of Purchase  If Possible please provide copy of the ticket  
If paid by credit card, please provide the first 6 and last 4 digits of the credit card. Do not provide all numbers.

Description of problem:

## TICKET PURCHASE DETAILS FOR SECOND TICKET (IF APPLICABLE)

Meter No.  How much was paid   
Date/Time of Purchase  If Possible please provide copy of the ticket  
If paid by credit card, please provide the first 6 and last 4 digits of the credit card. Do not provide all numbers.

I have read and accept the NCA Privacy Policy available on the NCA website at [www.nca.gov.au](http://www.nca.gov.au)