



APPLICATION FOR A GARAGE

NAME _____

ADDRESS _____

TEL.NO _____

MOBILE _____

EMAIL _____

Do you already rent a garage from Hertsmere?	Yes/No
If yes, how many?	
I wish to rent a garage in: (please state locality)	_____ _____
Is your vehicle use for business?	Yes/No
Registration number of vehicle	
Make and type of vehicle	
Signed	
Date	

To be returned to:-

**Hertsmere Borough Council, Asset Management Service Group - Garages, Civic Offices,
Elstree Way, Borehamwood, Herts, WD6 1WA.**

Or email completed form to garages@hertsmere.gov.uk