

**APPLICATION TO CREATE/DEACTIVATE PARKING PLACE FOR OVERNIGHT PARKING OF  
HEAVY VEHICLE AND  
ASSIGN/TERMINATE VEHICLE PARKING CERTIFICATES (VPC)**  
The Parking Places Act (Chapter 214)

LTA reserves the right to update the form without prior notice.  
Please ensure form is the latest. You can download forms from [OneMotoring website](#).

This form may take 10 minutes to complete. You will need the following information to complete the form:

- a) School Name as in ACRA
- b) School UEN no. as in ACRA
- c) HV Owner Name and ID as in ACRA/NRIC, if you are assigning VPCs
- d) Architect-endorsed Site Plan

**IMPORTANT NOTE**

Please enclose all the required documents before submitting.

The submission of an incomplete application or failure to follow the instructions stated, will cause a delay in the processing of your application. A complete application includes the receipt of all necessary documents, after which your application will then be processed.

**NOTES TO APPLICANT**

Please read the following instructions before completing the application form.

- i) The applicant shall be deemed to have read and understood the Parking Places (Licensing and Control of Private Parking Places for Heavy Vehicles) Rules.
- ii) Fill in **Part I and Part IV** and **any other Parts** as required according to your transactions.
- iii) Each VPC costs \$6. There is no GST for VPC fees.
- iv) For Enquiry on application-related: Please email us at [www.lta.gov.sg/feedback](http://www.lta.gov.sg/feedback) with the completed and endorsed application form.

**PART I: HEAVY VEHICLE PARK OPERATOR DETAILS**

- 1) School Name (Operator): \_\_\_\_\_
- 2) School UEN Number : \_\_\_\_\_
- 3) Address of School: \_\_\_\_\_  
\_\_\_\_\_ Postal Code: \_\_\_\_\_
- 4) Office Tel No: \_\_\_\_\_ Fax No: \_\_\_\_\_  
Mobile No: \_\_\_\_\_ Email Address: \_\_\_\_\_  
[For email correspondence]
- Contact Person: \_\_\_\_\_ (MR / MRS / MS / PROF / DR) \*Please select Salutation
- 5) Mailing Address: \_\_\_\_\_  
\_\_\_\_\_ Postal Code: \_\_\_\_\_

**PART II: TERMINATE VPCs**

*(VPC can only be terminated if the heavy vehicle has an alternative VPC.)*

<sup>1</sup>D – Deregistration of vehicle, L – Lay-up of vehicle, T – Transfer of vehicle, C – Change of parking place, Co-Conversion of vehicle, Ch – Wrong Chassis No

| S.No. | Vehicle No. | VPC No. | Termination Reason <b>(There is no refund for VPCs terminated)</b><br>(D/L/T/C/Co/Ch) <sup>1</sup> |
|-------|-------------|---------|--|
|       |             |         |  |
|       |             |         |  |
|       |             |         |  |
|       |             |         |  |
|       |             |         |  |
|       |             |         |  |
|       |             |         |  |
|       |             |         |  |

**PART III: ASSIGN VPCs**

<sup>2</sup>C – Conversion of vehicle; N – New Registration of vehicle; R – Road tax renewal; T – Transfer of vehicle

| S.No. | Vehicle No or Chassis No**<br>(**applicable for new registration only) | Purpose<br>(C/N/R/T) <sup>2</sup> | HV Owner Name | HV Owner ID | VPC Start Date | VPC End Date |
|-------|--|-----------------------------------|---------------|-------------|----------------|--------------|
|       |  |                                   |               |             |                |              |
|       |  |                                   |               |             |                |              |
|       |  |                                   |               |             |                |              |
|       |  |                                   |               |             |                |              |
|       |  |                                   |               |             |                |              |
|       |  |                                   |               |             |                |              |
|       |  |                                   |               |             |                |              |
|       |  |                                   |               |             |                |              |

6) If the HV Owner is a **first time asset owner**, please provide the following details. Please submit the business profile from ACRA.

| S.No. | HV Owner Name | Registered Address | Contact No. | Email Address |
|-------|---------------|--------------------|-------------|---------------|
|       |               |                    |             |               |
|       |               |                    |             |               |
|       |               |                    |             |               |

---

**PART IV: AUTHORISATION  
(IMPORTANT: PLEASE READ BEFORE SIGNING)**

I, represent and warrant that all information provided by me in this application and in any document submitted to you is true, accurate and complete.

Name of Authorised Person: \_\_\_\_\_ Designation: \_\_\_\_\_

Date: \_\_\_\_\_

\_\_\_\_\_  
Signature

\_\_\_\_\_  
School Stamp