



PARKING OCCUPANCY SURVEY

PART 1: CAR PARK INFORMATION

Car Park/Building Name: _____

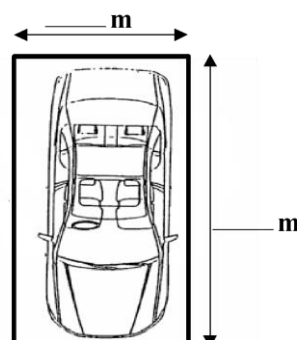
Car Park Operational Hours: _____

	Car	Motorcycle
Total Number of Lots		
Number of Lots reserved for Season Parking		
Are lots open to public / non-tenant?	Yes / No *	Yes / No *

* Please delete where inappropriate

Number of Loading/Unloading Bays: _____ Minimum Height Clearance: _____
(if applicable)

Please indicate car lot dimensions



PART 2: PARKING OCCUPANCY

Date of Survey Time (Hrs)	Day 1 __ / __ / __ (dd/mm/yy)		Day 2 __ / __ / __ (dd/mm/yy)		Day 3 __ / __ / __ (dd/mm/yy)	
	Total Number of Occupied Lots					
	Car	Motorcycle	Car	Motorcycle	Car	Motorcycle
0800						
0900						
1000						
1100						
1200						
1300						
1400						
1500						
1600						
1700						
1800						
1900						
2000						
2100						
2200						

Notes:

- Please indicate the number of occupied car and motorcycle lots at one hour intervals between 08.00am and 10.00pm for the three days
- If the car park is not in operation for a specific time slot, survey is not required for that period.

PART 3: SEASON PARKING

Please indicate the total number of season parking tickets *sold* in the past 3 months:

Car MM/YYYY: _____ MM/YYYY: _____ MM/YYYY: _____

Motorcycle MM/YYYY: _____ MM/YYYY: _____ MM/YYYY: _____

Is there a waiting list for season parking tickets for cars? Yes / No * (*Please delete where inappropriate*)

If yes, please indicate average waiting time _____ weeks / months *

Is there a waiting list for season parking tickets for motorcycles? Yes / No *

If yes, please indicate average waiting time _____ weeks / months *

Please indicate the total number of *free* parking labels issued in the past 3 months:

Car MM/YYYY: _____ MM/YYYY: _____ MM/YYYY: _____

Motorcycle MM/YYYY: _____ MM/YYYY: _____ MM/YYYY: _____

PART 4: PARKING CHARGES

Please indicate the operational hours and parking charges imposed in your car park as at **{date of application}**.

		Operational Hours	** Parking Charges		
			Car	Motor-cycle	Lorry
Monday to Friday	Hourly / Half-hourly*				
	Per Entry				
Saturdays	Hourly / Half-hourly*				
	Per Entry				
Sundays	Hourly / Half-hourly*				
	Per Entry				
Season Parking Charges	Tenant				
	Non-Tenant				

* *Please delete when inappropriate*

** *Please indicate rate structure e.g. 1st hour \$2.00 and subsequent hour \$1.00 or \$2.00 per entry.*

Please indicate how parking charges are currently collected. (*Please tick*)

☐ Full EPS (ERP-type Parking System)

☐ Magnetic Ticket

☐ Semi EPS

☐ Manual operator

☐ Cashcard System

☐ Others (*please state*) _____

PART 5: PARTICULARS OF CONTACT PERSON

I confirm that the information given above is complete and correct as of today.

Signature of Authorised Officer

Date: _____

Name : _____

Company : _____

Contact No. : _____

Email : _____

If you have suggestions on how we can improve the next Parking Survey, please indicate them below:

~ End of Survey ~

Thank you for your co-operation. Your completed return will be treated as strictly confidential.