



# PERSONAL DATA - 個人資料

## Application for Closed Area Permit

<b>O</b>
Applicable to Corporation /

**For Work / Business (please read the attached notes before completing this form)**

On behalf of my company, I hereby apply to the Police for Closed Area Permits / Closed Road Permits for my staff and/or company vehicles to enter the following closed area:

(Please 'tick' (✓) the appropriate box)

Hong Kong-Zhuhai-Macao Bridge Hong Kong Port

Name of Company/Organization (English) : .....

(Chinese) : .....

from ..... (year) ..... (month) ..... (day) to ..... (year) ..... (month) ..... (day)

and from ..... (hours) to ..... (hours)

Reason : .....

Please find below details of our staff:- (Please add Appendix 1 if necessary)

1) English Name : .....  
(Please use BLOCK letters)

Chinese Name ..... Gender  M  F

Identity document No. : .....

Title/Post held : .....

Old Closed Area Permit No. (if any) : .....

1) English Name : .....  
(Please use BLOCK letters)

Chinese Name ..... Gender  M  F

Identity document No. : .....

Title/Post held : .....

Old Closed Area Permit No. (if any) : .....

1) English Name : .....  
(Please use BLOCK letters)

Chinese Name ..... Gender  M  F

Identity document No. : .....

Title/Post held : .....

Old Closed Area Permit No. (if any) : .....

The following is/are my company vehicle(s) or vehicle(s) authorized to be used. The application for Closed Road Permit(s) is necessary for carrying out the work stated in this form. I have checked the documents concerned and found them true and correct: (Please add Appendix 2 if necessary)

1) Vehicle No.	.....					
Registered Owner	.....					
Vehicle Type	<input type="checkbox"/> Private Car	<input type="checkbox"/> Light Goods Vehicle	<input type="checkbox"/> Motor Cycle	<input type="checkbox"/> Private Light Bus	<input type="checkbox"/> Public Light Bus	<input type="checkbox"/> Taxi
	<input type="checkbox"/> Private Bus	<input type="checkbox"/> Public Bus	<input type="checkbox"/> Invalid Carriage	<input type="checkbox"/> Government Vehicle	<input type="checkbox"/> Public Bus - Franchised	
	<input type="checkbox"/> Medium Goods Vehicle	<input type="checkbox"/> Heavy Goods Vehicle	<input type="checkbox"/> Articulated Vehicle	<input type="checkbox"/> Special Purpose Vehicle	<input type="checkbox"/> Motor Tricycle	<input type="checkbox"/> Others
Driver's name (in English)	.....					
Identity Card No.	.....	Old Closed Road Permit No. (if any)	.....			
Post	.....					
Driver's name (in English)	.....					
Identity Card No.	.....	Old Closed Road Permit No. (if any)	.....			
Post	.....					
Driver's name (in English)	.....					
Identity Card No.	.....	Old Closed Road Permit No. (if any)	.....			
Post	.....					

**I certify that the mentioned staff and vehicle(s) are required to access the closed area for the stated reason.**  
**I certify that the mentioned information and copy(ies) of the identity document(s) submitted are true.**  
**I consent to Police investigation of the mentioned information in order to ascertain its accuracy.**  
**I certify that consent has been given from each applicant for making application for the Closed Area Permit on his/her behalf.**  
**I understand that the Closed Area Permit(s) / Closed Road Permit(s) must be returned to the permit issuing office for cancellation when my staff or I no longer require to access to the closed area.**  
**I understand that Commissioner of Police has the authority to cancel or revoke the Closed Area Permit(s) / Closed Road Permit(s) issued.**  
**I understand that I may be liable to prosecution for a criminal offence if I wilfully give any information which I know to be false or do not believe to be true.**  
**I undertake to inform the above mentioned staff that if he/ she enters the closed area to carry out any activity not approved at the time of application, he/ she may be liable to prosecution for a criminal offence.**  
**This application form must be filled in by a manager authorized by the company or staff of equivalent rank or above.**

Name .....  
Identity Document No. .... Date ..... / ..... / .....  
Title/Position .....  
(Manager or equivalent)  
Fax No. .... Telephone No. ....  
Name of contact person .....  
Telephone No. ....  
Signature ..... Name of Company / Organization (Stamp) .....

S/N: ( )  
English Name (Please use BLOCK letters)  
Chinese Name Gender  M  F  
Identity document No.  
Title/Post held  
Old Closed Area Permit No. (if any)

S/N: ( )  
English Name (Please use BLOCK letters)  
Chinese Name Gender  M  F  
Identity document No.  
Title/Post held  
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S/N: ( )  
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S/N: ( )  
English Name (Please use BLOCK letters)  
Chinese Name Gender  M  F  
Identity document No.  
Title/Post held  
Old Closed Area Permit No. (if any)

1) Vehicle No. ....

Registered Owner .....

Vehicle Type

<input type="checkbox"/> Private Car	<input type="checkbox"/> Light Goods Vehicle	<input type="checkbox"/> Motor Cycle	<input type="checkbox"/> Private Light Bus	<input type="checkbox"/> Public Light Bus	<input type="checkbox"/> Taxi
<input type="checkbox"/> Private Bus	<input type="checkbox"/> Public Bus	<input type="checkbox"/> Invalid Carriage	<input type="checkbox"/> Government Vehicle	<input type="checkbox"/> Public Bus - Franchised	
<input type="checkbox"/> Medium Goods Vehicle	<input type="checkbox"/> Heavy Goods Vehicle	<input type="checkbox"/> Articulated Vehicle	<input type="checkbox"/> Special Purpose Vehicle	<input type="checkbox"/> Motor Tricycle	<input type="checkbox"/> Others

Driver's name (in English) .....

Identity Card No. .... Old Closed Road Permit No. (if any) .....

Post .....

Driver's name (in English) .....

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