

Application for Winter Parking

Name: _____

Address: _____ Zip: _____

Phone Number: _____ Email: _____

Single Family ____ Double ____ (if double, please provide vehicle info for other unit on reverse side)

Reason for Permit:

List of Vehicles in the household (please indicate which car is being requested for the permit):

Vehicle# 1: Owner of Title: _____ License Plate _____

Year: _____ Make: _____ Model: _____ VIN# _____

Vehicle #2: Owner of Title: _____ License Plate _____

Year: _____ Make: _____ Model: _____ VIN# _____

Vehicle #3: Owner of Title: _____ License Plate _____

Year: _____ Make: _____ Model: _____ VIN# _____

Vehicle #4: Owner of Title: _____ License Plate _____

Year: _____ Make: _____ Model: _____ VIN# _____

(Please attach separate sheet if there are additional vehicles)

Signature: _____ Date: _____

Approved:

Fee Paid:

Denied: