



On-Street Resident Day & Night Permit Application

Front Office Use
Permit _____
Date _____

NO FEE FOR PERMIT

Name: _____

Address: _____

Telephone No.: _____

Email: _____

_____ 1 or _____ 2 Family*

*Please be sure to check if the house is a 1 or 2 family home and include apartment number or floor number.

Vehicle Information:

Make: _____

Model: _____

Year: _____ Color: _____

Plate No.: _____

1. Do you have a driveway on your property? Yes _____ No _____
If yes, skip to question # 4.

2. Is there enough property to construct a driveway? Yes _____ No _____

3. Is there a past easement to allow use of a neighboring driveway? Yes _____ No _____

4. (a.) Extenuating circumstances, please provide details in full below:

I hereby certify that all statements provided above are true and factual in nature. I further understand any person (s) who obtains a permit pursuant to Ordinance 151-11.1 under false or misleading circumstances shall be subject to punishment as set forth under the law.

Signature of Applicant _____ Date _____

I have inspected the premises and I find this application is:

*Approved _____ Denied _____

Authorized _____ Date _____

*All permits issued under extenuating circumstances are subject to review and re-issuance on an annual basis so long as the extenuating circumstances continue to exist.

The permit entitles the holder to park on the street in front of the residence or within close proximity of the residence. See back of permit for rules governing the use of permit.

Replacing permits for any reason - \$10