

PLYMOUTH POLICE DEPARTMENT

ON-STREET PARKING PERMIT APPLICATION

PERMITS ARE GOOD FROM JULY 1 TO JUNE 30

There is a charge of **\$25.00 per permit**. Fee will be pro-rated depending on time of purchase.

DATE OF APPLICATION: ____/____/____

NAME: _____ TELEPHONE: (____) _____

ADDRESS: _____ APT# _____

TOTAL NUMBER OF VEHICLES **REGISTERED** TO YOUR ADDRESS: _____

REASON REQUESTING PARKING PERMIT: _____

GARAGE AND DRIVEWAY SPACE WILL BE CONSIDERED IN APPROVAL PROCESS.

ALL VEHICLES REGISTERED TO ADDRESS: If additional vehicles, add to back.

VEHICLE YEAR/MAKE: _____ MODEL: _____ COLOR _____ PLATE # _____

VEHICLE YEAR/MAKE: _____ MODEL: _____ COLOR _____ PLATE # _____

VEHICLE YEAR/MAKE: _____ MODEL: _____ COLOR _____ PLATE # _____

VEHICLE YEAR/MAKE: _____ MODEL: _____ COLOR _____ PLATE # _____

VEHICLE YEAR/MAKE: _____ MODEL: _____ COLOR _____ PLATE # _____

 PROVIDE **COPY OF DRIVERS LICENSE** AND **COPIES OF REGISTRATIONS** FOR **ALL VEHICLES** REGISTERED TO THIS ADDRESS YES _____ NO _____

▶ **NOTE: BOTH DRIVERS LICENSE AND REGISTRATIONS MUST HAVE VALID PLYMOUTH CITY ADDRESSES OR APPLICATION WILL BE DENIED**

*****OFFICE USE ONLY*****

DATE RECEIVED: ____/____/____ RECEIVED BY: _____ BADGE # _____

VEHICLES PUT ON OVERNIGHT LIST THROUGH: _____

APPRVD DATE: _____ ORDINANCE OFFICER SIGNATURE: _____

DENIED: _____ REASON: _____

PERMIT NUMBER(S) ISSUED: _____

DATE ISSUED: _____ MEANS OF ISSUANCE: MAILED, IN PERSON

COMPUTER ENTRY BY: _____