

Annual Renewal Application for Reserved Parking Permit

Date _____

Applicant's name _____

Applicant's street address _____

Applicant's phone number _____

Vehicle plate number _____

VIN _____ Make _____ Model _____ Year _____

Color _____ Registered Owner _____

Please check the type of parking permit renewal requested:

_____ Reserved Handicapped _____ Reserved Residential

It is requested that a reserved parking sign and post be installed at the following location, if **different than applicant's street address**:

Fee paid \$ _____

Date paid _____

If a **reserved handicapped parking permit** is issued, it is understood and agreed that only the registered vehicle of the permit holder will be permitted to park in this space, subject to Chapter 15, Part 4, section 412 of the Code of Ordinances of the Borough of Hollidaysburg.

For **reserved residential parking**, please submit a separate application and fee per vehicle.

Applicant Signature Date _____

Application approved _____ Date _____

Parking Permit Number _____

Borough Manager