BOROUGH OF CHAMBERSBURG

RESIDENTIAL PARKING APPLICATION

OWNER'S NAME: _____

OWNER'S ADDRESS: _____

CAR MAKE/MODEL: _____

_____

_____

OWNER'S LICENSE PLATE # _____

_____

_____

OWNER'S DRIVER'S LICENSE # _____

INDICATE NUMBER OF PERMITS REQUESTED AND CURRENT TAG #S ASSIGNED IF APPLICABLE

RESIDENTIAL R_____

VISITOR V_____

TRADESMAN T_____

PLEASE INDICATE BY CHECKING THE APPROPRIATE BOX:

Date sticker only ☐

Permit and date sticker ☐

PLEASE MAKE CHECKS PAYABLE TO THE BOROUGH OF CHAMBERSBURG