



# Borough of Collingswood



## BUSINESS EMPLOYEE PARKING PERMIT APPLICATION

### Business:

Business Name \_\_\_\_\_

Business Owner \_\_\_\_\_

Business Address \_\_\_\_\_

Business Phone # \_\_\_\_\_

### Employee:

Employees Name \_\_\_\_\_

Employees Address \_\_\_\_\_

Employees Phone # Home: \_\_\_\_\_ Cell: \_\_\_\_\_

### Vehicle:

Vehicle Make \_\_\_\_\_ Model \_\_\_\_\_

Tag # \_\_\_\_\_ Color \_\_\_\_\_

### Permit Type:

Full Year \_\_\_\_\_ \$145.00

Monthly \_\_\_\_\_ \$13.00 per month

From: \_\_\_\_\_ to \_\_\_\_\_

By applying for and accepting this permit, I understand that this permit is only valid in areas designated for the permit parking. (see instruction sheet) Permits may be suspended or revoked by the Chief of Police for any violation of the parking rules and the fee is not subject to refund.

Vehicle Owners Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Business Owners Signature: \_\_\_\_\_ Date: \_\_\_\_\_

### Official Use Only

Approved \_\_\_\_\_ Denied \_\_\_\_\_ Permit # \_\_\_\_\_

Issues Date \_\_\_\_\_ Expiration Date \_\_\_\_\_ Price \_\_\_\_\_

Form of Payment \_\_\_\_\_ Check # \_\_\_\_\_