

BOROUGH OF INDIANA

PERMIT NO.	DATE ISSUED	EXPIRATION DATE	CATEGORY
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PROPERTY OWNER/PERMIT HOLDER

OWNER'S LAST NAME	FIRST NAME	MIDDLE NAME		
DRIVER'S LICENSE NO.	PHONE	EMAIL ADDRESS		
STREET ADDRESS	CITY	STATE	ZIP CODE	
VEHICLE MAKE/MODEL	YEAR	COLOR	LICENSE TAG NO.	STATE

VERIFICATION FOR TENANT PERMIT: I verify that: I have read, understand, and agree to abide by the Rules and Regulations for residential permit parking; and, the person named below resides at the street address listed for this permit and has my permission to use one of the permits issued for this property under the Residential Permit Parking Program.

SIGNATURE: _____ **DATE:** _____

TENANT PERMIT HOLDER

LAST NAME	FIRST NAME	MIDDLE NAME		
DRIVER'S LICENSE NO.	PHONE	EMAIL ADDRESS		
HOME STREET ADDRESS	CITY	STATE	ZIP CODE	
VEHICLE MAKE/MODEL	YEAR	COLOR	LICENSE TAG NO.	STATE
STREET ADDRESS FOR PERMIT:				

AT THE TIME OF APPLICATION, APPLICANT MUST PRESENT PROOF OF RESIDENCY AND VEHICLE REGISTRATION ALONG WITH THIS COMPLETED FORM

PERMIT MUST BE DISPLAYED AS FOLLOWS:

>AFFIX ANNUAL PERMIT ON DRIVER'S SIDE REAR BUMPER.

>LAY TEMPORARY PERMIT OR SPECIAL USE PERMIT ON THE DASHBOARD ON THE DRIVER'S SIDE.

NOTICE: IF YOU MOVE FROM THE LISTED ADDRESS OR SELL YOUR VEHICLE YOU MUST REMOVE THE PERMIT AND RETURN IT TO:

BOROUGH OF INDIANA, 80 N. 8TH ST., INDIANA, PA 15701

7/7/2010