



Incorporated Village of Woodsburgh

PARKING WAIVER REQUEST

ADDRESS REQUESTING WAIVER: _____

OWNER REQUESTING WAIVER: _____

DATES OF REQUEST FROM: _____ TO: _____

TIMES FROM: _____ TO: _____

REASON FOR REQUEST: _____

NUMBER OF VEHICLES: _____

OWNER SIGNATURE

DATE

**ALL VEHICLES ARE TO BE PARKED ON ONE SIDE OF THE STREET &
THE VILLAGE OFFICE WILL DIRECT YOU ON WHICH STREETS THE CARS CAN BE PARKED.**