

Senior Citizen _____

Overnight Parking Application

All permits expire June 30th of each year and require re-application for renewal

Date: _____	Application Fee: \$50.00
Name: _____	Renewal Fee: \$50.00
Phone #: _____	Replacement Sticker Fee: \$2.00
Email: _____	Must be cash or check

Reason for Permit: _____

List **ALL** licensed drivers and vehicles that utilize the driveway and are registered to the above address

Driver #1 Name: _____	License #: _____
Driver #2 Name: _____	License #: _____
Driver #3 Name: _____	License #: _____
Driver #4 Name: _____	License #: _____
Driver #5 Name: _____	License #: _____
Driver #6 Name: _____	License #: _____

Vehicle #1 Plate: _____	Year _____	Make _____	Model _____	Permit For: <input type="checkbox"/>
Vehicle #2 Plate: _____	Year _____	Make _____	Model _____	<input type="checkbox"/>
Vehicle #3 Plate: _____	Year _____	Make _____	Model _____	<input type="checkbox"/>
Vehicle #4 Plate: _____	Year _____	Make _____	Model _____	<input type="checkbox"/>
Vehicle #5 Plate: _____	Year _____	Make _____	Model _____	<input type="checkbox"/>
Vehicle #6 Plate: _____	Year _____	Make _____	Model _____	<input type="checkbox"/>

Garage on Location Yes or No If yes, size: _____ cars

Driveway on Location Yes or No If yes, size: _____ cars

Helpful Notes

All drivers and vehicles must be registered to the address you are applying for street parking

Missing / Illegible information will result in a denied application

If garage/driveway space is available, a permit will not be approved

Daily Overnight Requests

The website will not work if you submit more than 7 days worth of request per month

<https://www.frontlinepss.com/oaklyn>

***DO NOT WRITE BELOW THIS LINE ***

Approved: _____	Permit #: _____	Date Called: _____	Received: _____
Denied: _____	Reason: _____	Appealed: _____	
Officer Signature: _____	Date Letter Sent: _____	Result: _____	