



HADDONFIELD POLICE DEPARTMENT ALL-NIGHT PARKING PERMIT APPLICATION

NAME: _____ PHONE #: _____
Last First MI

ADDRESS: _____
Include apartment/unit # if applicable

READ CAREFULLY BEFORE SIGNING:

I certify that the property listed above has no/insufficient off-street parking as defined by Borough Ordinance (copy available upon request). I further state that I am a full-time resident of the listed property, my NJ Driver's License is currently valid and the listed vehicle is legally registered to the property listed above. I understand that the issuance of an all-night parking permit does not allow me to park the listed vehicle in violation of any State laws or other Borough ordinances. I further understand that the permits are valid for a one-year period (January 1st through December 31st) and it is my sole responsibility to renew the permit. Permits are \$25 for the year (permits issued after July 1st are \$15) if the property has no off-street parking. Permits for those properties with available off-street parking are \$100 for the year (permits issued after March 31st are \$10 per month for the remaining months of the calendar year). Permits are to be affixed, from inside the car, to the back of the rear view mirror. **NOTE: PERMITS DO NOT ALLOW THE PARKING OF ANY VEHICLE DURING TIMES OF EMERGENCY (i.e.: snow accumulation of 3" or more, posted "No Parking" due to leaf removal and/or seasonal parades).** ANY VIOLATION OF THIS AGREEMENT WILL RESULT IN THE ISSUANCE OF A SUMMONS AND/OR THE REVOCATION OF YOUR PERMIT. IT IS THE RESPONSIBILITY OF THE APPLICANT TO ENSURE THAT THE PERMIT IS VISIBLE FOR POLICE.

MAKE OF CAR: _____ YEAR: _____ COLOR: _____

TAG NUMBER: _____ MODEL: _____ STYLE: _____

TAG NUMBERS OF OTHER VEHICLES AT THE PROPERTY: _____

YOUR SIGNATURE: _____ DATE: _____

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FOR OFFICIAL USE ONLY

APPLICATION APPROVED: _____ OR NOT APPROVED: _____

REASON FOR NOT APPROVING PERMIT: _____

INVESTIGATED BY: _____ PERMIT #: _____

DRIVEWAY: YES OR NO