



Date of Issuance: _____

Permit#: _____

Replacing vehicle/permit#: _____

2020-2022

MARCUS HOOK RESIDENTIAL PARKING PERMIT APPLICATION

Any permit issued as a result of the information provided herewith is subject to the provisions of Chapter 191 of the Code of the Borough of Marcus Hook, pertaining to residential parking zones.

Upon the submission of this application, you will be asked to present your valid PA driver's License, Vehicle Registration Card, and PA Financial Responsibility Card (proof of insurance). License must list a Marcus Hook address to be issued a residential parking permit. Permits are valid from date of issuance to 12/31/22.

Driver's Name: _____

Driver's Address: _____

Driver's Phone: (home) _____ (work) _____ (cell) _____

Driver's License Number: _____

Vehicle Owner's Name: _____

Vehicle Owner's Address: _____

Vehicle Owner's Phone: (home) _____ (work) _____ (cell) _____

Vehicle Identification Number (VIN): _____

License Plate Number: _____

Vehicle Make: _____ Model: _____ Year: _____ Color: _____

INSURANCE INFORMATION:

Insurance Company: _____

Policy Number: _____

Effective Date _____ Expiration Date _____

I, the undersigned, do hereby certify that the information provided on this application form is CORRECT. That the vehicle is utilized by the applicant and is properly registered, state inspected, and insured. It is further understood that submitting any false information or failure to abide by the Marcus Hook Borough residential parking rules and regulations will result in possible fines and the loss of residential parking privileges.

NOTICE: Permits are not transferable from one car to another and are issued one per licensed driver. If the permit is lost or stolen, the charge for a new permit is \$5.00.

Applicant Signature _____

For Borough use only.....

PARKING PERMIT APPLICATION CHECKLIST:

YES NO

___ ___ APPLICATION COMPLETED

___ ___ APPLICATION SIGNED BY DRIVER/VEHICLE OWNER (S)

___ ___ PENNSYLVANIA DRIVER'S LICENSE

___ ___ PENNSYLVANIA VEHICLE REGISTRATION CARD

___ ___ PENNSYLVANIA FINANCIAL RESPONSIBILITY CARD (insurance card)

___ ___ APPLICATION REJECTED _____
DATE

___ ___ APPLICATION APPROVED _____
DATE NUMBER

AUTHORIZED BY