



3930 N. Murray Avenue * Shorewood, Wisconsin * 53211-2303
Phone 414-847-2700 / Fax 414-847-2606

PARKING LOT / STREET BUMPER PERMIT INFORMATION FORM

Name: _____

Street Address: _____ Apt. #: _____

Home Phone: _____ Business Phone: _____

Email Address: _____

Vehicle Make: _____ Model: _____

License Plate Number: _____ State: _____

Year of Car: _____ Color: _____

I certify that I have received a copy of the Municipal Parking Lot Policy and am familiar with its contents. I also certify that I am responsible for contacting the Village Customer Service office should any of the above information change.

Signature: _____ Date: _____

PARKING PERMIT INFO (Office Use Only)	Date
--	-------------

_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

Landlord: _____