

Q4:	_____
Q3:	_____
Q2:	_____
Q1:	_____

TEN (10) HOUR METER PARKING PERMIT APPLICATION

VALID FOR 2024- QUARTERLY

ONLY FOR USE AT: 10 HOUR METERS EAST OF CHURCH STREET

NOT VALID FOR ANY TWO-HOUR METERS.

NOT VALID FOR THE PARK AND SHOP LOT ON MAIN STREET, OR RESTRICTED PARKING AREAS.

WINTER OVERNIGHT PARKING RULES REMAIN IN EFFECT

By signing below, I understand, and I am certifying:

1. I will not use this permit for any vehicle other than the vehicles on this original application.
2. If I dispose of a vehicle and replace it with another, I shall notify Honesdale Borough parking enforcement of all new vehicle information, or I may be ticketed. If my vehicle is in the shop and I have a loaner/rental, I may use my original permit if notifying the borough by 10AM. Failure to do so, will result in tickets being valid.
3. I understand there is no guarantee I will find a parking place at a 10-hour meter near my destination.
4. There are no designated/reserved parking spaces/meters for anyone.
5. This permit expires at the end of my current quarter purchased. It is my responsibility to renew each quarter.

When making application:

1. Please complete this form in its entirety (front and back)
2. Please have the following vehicle information available:
 - a. Year, make, model, and color
 - b. license plate number

Print Name: _____

Print Address: _____

Cell Phone #: _____ **Home#:** _____ **Work#:** _____

Employer (optional): _____

Vehicle #1 Year, Make, Model, Color: _____

Vehicle #1 Plate number: _____

Permit #: _____

Vehicle #2 Year, Make, Model, Color: _____

Vehicle #2 Plate number: _____

Permit #: _____

Vehicle #3 Year, Make, Model, Color: _____

Vehicle #3 Plate number: _____

Permit #: _____

Quarterly permits may be renewed each quarter using this application. Please bring your actual permit placard into the borough office when renewing.

Fee per each quarter through December 2024: \$80.00 each *No Proration*

Applicant Signature: _____

For Borough Use Only

Total Fee: **\$ 80.00** _____

Credit Card Type: _____

Cash: _____

Check Number: _____

Date: _____

Borough Representative Signature: _____