

SWIPE CARD # ISSUED_____

CITY OF NIAGARA FALLS PARKING PERMIT APPLICATION

\$40.00 per month Deposit \$10.00 (for each permit card)		(Swipe Card Returned – Date)		
Date	Print Name			
Home Address Street	City/S	tate	Zip	
Home Phone	Cell	W	/ork	
Vehicle Make/Model/Year	F	late#	Color	
NYS Vehicle Registration Number		Registration Expiration		
Driver's License Number		Driver's License Expiration		
Employer				
Method of Payment		Amount Paid_		
 car. Operator does not guard or assume care, custloss. Only a license to park is granted herby and not This is not a claim check. This is your contract and no employee may milif in any case you have lost your Parking Perr There are no refunds. This permit is valid only when verified by payr payment is delinquent. Payment is due in full regardless of date of re If caught sharing your permit with anyone, you authorities will be notified. The City has the rig By signing this document, you accept and agric 	ct. It licenses you to park of owner's sole risk at the po- stody or control of your veh to bailment is created. Hodify or waive any of its its nit card, you are exempt fin ment has been made durin newal. U are guilty of theft of ser ght to revoke the Parking F ree to all the preceding ter	osted rates. The owner al nicle or its contents and is ems. rom receiving your deposing the designated time per vices. In this case your p Permit if misuse is determing.	lone is responsible for parking and locking his s not responsible for fire, theft, damage or sit. eriod. It will become invalid and not usable if permit will be revoked permanently and	
NO FEE REFUND: Pass deposit will be refunded *YOU HAVE 30 DAYS AFTER PASS IS INVALIE	upon surrender of pass TO GET YOUR DEPO	3. DSIT REFUNDED.		
Signatures: Swipe Card Holder				

For disputes regarding violations and tickets, please contact the Niagara Falls Police Department 716-286-4547

Employee Verifying Sale _____