

DURAND POLICE DEPARTMENT
APPLICATION FOR ON STREET PARKING

Date of Application: _____

Name of applicant: _____

Address: _____ Phone No: _____

Number of vehicles registered to above address: _____

Number of permits requested: _____

Why are permits needed: _____

Vehicle(s) will be parked on _____ Street.

Completely fill in the below information for each vehicle that you are requesting a permit for:

License Plate #: _____ Make: _____ Color: _____ Model: _____

License Plate#: _____ Make: _____ Color: _____ Model: _____

License Plate#: _____ Make: _____ Color: _____ Model: _____

Each permit cost is \$15.00

Permits will not be issued for parking on Main, Saginaw, Oak and the 100 Blk of E. and W. Clinton St
Permits are valid for the vehicles they are issued for only.

Permits are to be displayed from your vehicle's rear view mirror only. Parking citations may be issued if you improperly display your permit.

Permit Denied: _____ Reason for Denial: _____

Permit Issued Information:

Permit # _____ for vehicle registration _____

Permit # _____ for vehicle registration _____

Permit # _____ for vehicle registration _____

Contact 288-3113, Monday – Friday between 8:30 a.m. and 5:00 p.m. to confirm if permit was issued or denied. Please allow a minimum of three days from the day application was submitted before contacting Durand City Hall.

Chief of Police's Signature: _____ Date: _____

