



LOT A COMMUTER PARKING APPLICATION

Mamaroneck Town Clerk's Office
740 W. Boston Post Rd.
Mamaroneck, NY 10543
Townclerk@townofmamaroneckNY.org
914-381-7870
(Please write clearly)

Applicant _____ E-Mail _____@_____

Street Address _____, _____, _____

Best Contact Home Phone or Cell Phone # _____ - _____ - _____

Vehicle #1 Make _____ Vehicle #1 Model _____ License Plate #1 _____

Vehicle #2 Make _____ Vehicle #2 Model _____ License Plate #2 _____

DAYTIME – LOT A – MYRTLE BLVD

12 months (up to 2 vehicles, 1 permit) - \$900.00. Valid January 1, 2022 through December 31, 2022.

All permit holders may choose to put up to 2 vehicles on 1 tag, at no extra charge, but only 1 vehicle may be parked in Lot A at any given time.

PLEASE ENCLOSE THE FOLLOWING **FOUR ITEMS ALONG WITH YOUR APPLICATION:**

1. A copy of your valid Driver's License
2. A copy of your valid Vehicle Registration(s) --For each vehicle on your tag.
3. Check or money order made payable to 'Town of Mamaroneck' – Please note, we will not accept any cash or credit card payments at drop off. If you wish to pay by credit card, please process your application online.
4. A Self-Addressed, Stamped Envelope – For us to mail your new permit to you. Note, if you are dropping off your application, please simply place your application, the copies of your vehicle registration and driver's license, and your check ALL in the self-addressed, stamped envelope, but please do NOT seal your self-addressed, stamped envelope.

Mailing is preferred, but you can drop off your application packet to the greeter at the Town Center. Please note the Town Clerk's Office is not open to the public without an appointment. We cannot review paperwork or take credit card payments. To pay by credit card, you must use the portal.

PLEASE READ AND SIGN THE FOLLOWING:

I understand that, pursuant to Town Code Chapter 219 Vehicle and Traffic, my permit tag will be displayed properly at all times while parked in the Town lot by hanging, facing outward, from the vehicle's rearview mirror. I hereby affirm under penalty of perjury that information provided on this application is true. I also understand that if this statement is false or if I in any way change or deface the parking permit issued to me, I am subject to revocation of my parking privileges and/or prosecution for making a false statement.

Signature of Applicant _____ Date: _____

Check ONE of the following: Mail my permit Let me know when permit is ready for pick up from the Town Center (M-F 9am-4pm)