



RICHARD EHLE
CHIEF OF POLICE

CAPITOLA POLICE DEPARTMENT

PARKING PERMIT APPLICATION

Applicant Name	
Address	Phone No.

	VEHICLE 1	VEHICLE 2	VEHICLE 3
PERMIT NO.			
TYPE			
LICENSE			
MAKE			
MODEL			
COLOR			

Visitor Permit No. _____ No. _____ Lost or Stolen Permit No. _____

Transferrable Permit No. (Village Residents ONLY) _____

VILLAGE PERMITS ONLY:

Do you have off-street parking available _____ If yes, number of spaces _____

ALL RESIDENTS:

I hereby acknowledge that I have received a copy of and understand the conditions of this permit. If I am issued a permit by the Chief of Police, I will abide by the conditions.

Signature

Date