

INCORPORATED 1836



The Borough of Hollidaysburg

401 Blair Street, Hollidaysburg, PA 16648 814/695-7543

Fax 696-0636

TTY 696-0300

Annual Renewal Application for Reserved Parking Permit

Date _____

Applicant's name _____

Applicant's street address _____

Applicant's phone number _____

Vehicle plate number _____

VIN _____

Make _____ Model _____ Year _____

Color _____ Registered Owner _____

Please check the type of parking permit renewal requested:

_____ Reserved Handicapped _____ Reserved Residential

Fee paid \$ _____

Date paid _____

**If a reserved handicapped parking permit is issued, a copy of your current handicapped placard and current vehicle registration is REQUIRED.
For a reserved residential parking permit is issued, a copy of the current vehicle registration is REQUIRED.**

Applicant Signature _____ Date _____

Application approved _____ Date _____

Parking Permit Number _____

Borough Manager