



**Village of Amityville**  
21 Ireland Place, Amityville, NY 11701  
Phone: (631) 264-6000 Fax: (631) 598-0363

Court \_\_\_\_\_

Code Enforcement \_\_\_\_\_

**Application for: On- Street Parking Permit**  
**Section 172-26 thru 172-27 of Village Code**

Temporary Permit \$50.00 Paid on: \_\_\_\_\_ Receipt No. \_\_\_\_\_ **Attach copy of your driver's license**  
Six Month Permit Fee \$125.00 Paid on \_\_\_\_\_ Annual Permit Fee \$150.00 Paid on: \_\_\_\_\_

Applicant Name: \_\_\_\_\_

Address: \_\_\_\_\_ Phone #: \_\_\_\_\_

Does residence have a garage? Yes  No  Use: \_\_\_\_\_

Does residence have a basement? Yes  No  Use: \_\_\_\_\_

Is house a two-family? Yes  No

Property Owner's Name (if different) \_\_\_\_\_

Address: \_\_\_\_\_ Phone #: \_\_\_\_\_

Reason for On-Street Parking \_\_\_\_\_

Length of time requested \_\_\_\_\_ Total Number of vehicles on premises: \_\_\_\_\_

What is your plan to resolve your need for on-street parking? \_\_\_\_\_

By what date do you expect to have the problem resolved? \_\_\_\_\_

This application is for:

Vehicle Year	Vehicle Make/Model	License Plate No.	Expiration Date	Is this a renewal request?

List all other vehicles owned by persons residing at this residence:

**Please include a photo showing all vehicles listed below fit in driveway without blocking right-of-way or sidewalk.**


List all other vehicles which currently have valid on-street parking permits:


**Note: Applicant must attach copies of vehicle registrations for ALL vehicles stored on premises. Vehicle approved for on-street parking must be parked directly in front of applicant's residence. In the event of a snow storm or emergency, ALL vehicles must be removed from the street.**

In consideration of the approval of this application, I hereby release the Village of Amityville from any liability for personal injuries or property damage arising while my vehicle is parked on a Village street.

Date: \_\_\_\_\_ Signature of Applicant \_\_\_\_\_

**FOR VILLAGE USE ONLY**

Temporary Permit No: \_\_\_\_\_ Expires: \_\_\_\_\_ Number of current valid permits: \_\_\_\_\_

Completed by: \_\_\_\_\_ Date: \_\_\_\_\_

*To be completed by the Police Department/Court Clerk*

Outstanding Summons: YES  NO  How many summons: \_\_\_\_\_

Total Amount Due: \$ \_\_\_\_\_

Comments: \_\_\_\_\_  
\_\_\_\_\_

Completed by: \_\_\_\_\_ Date: \_\_\_\_\_

*To be completed by the Building Department*

Verified that dwelling is a single family: YES  NO

Number of off-street parking spaces: Driveway \_\_\_\_\_ Garage \_\_\_\_\_ TOTAL: \_\_\_\_\_

Comments/recommendationis: \_\_\_\_\_  
\_\_\_\_\_

Completed by: \_\_\_\_\_ Date: \_\_\_\_\_

*Action by the Board of Trustees:*

Date: \_\_\_\_\_

APPROVED  APPROVED WITH STIPULATIONS  DISAPPROVED

If Approved: Permit Number: \_\_\_\_\_ Expiration Date: \_\_\_\_\_