

GARBAGE/SNOW DAY PARKING PERMIT

- ❖ Each vehicle listed on the application **MUST** register to the address you are applying for. Family, friends and company vehicles ARE NOT eligible, unless they register to the address listed on the application.
- ❖ The application must list **ALL** vehicles registered to the address whether or not they are in the applicant's name.
- ❖ You are not eligible for permits if you have parking space in your garage/driveway for the number of vehicles registered to your address. If you have a two car garage, that counts as two spaces. If your garage is used to store items, it still counts as available vehicle parking space.
- ❖ Permit fee is **\$50.00** per permit, payable after your application has been approved.
- ❖ Permits are good for two (2) years and expire on December 31st of the year indicated on the permit. Permits **DO NOT** automatically renew. You must apply for a new permit at least one (1) month prior to expiration.
- ❖ Permits can **ONLY** be transferred to new vehicles upon the approval of the Police Department.



MADISON HEIGHTS
GARBAGE DAY/SNOW DAY
PARKING PERMIT APPLICATION



NAME: _____ DATE: _____

ADDRESS: _____ Your Trash Day: _____

HOME PHONE: _____ WORK PHONE: _____

EMAIL: _____

I AM REQUESTING A PERMIT FOR: (PLEASE CHECK ALL THAT APPLY)

☐ TRASH DAY PARKING ☐ SNOW EMERGENCY PARKING ☐ BOTH

TOTAL NUMBER OF VEHICLES REGISTERED AT YOUR ADDRESS _____
You must list ALL of the vehicles registered whether or not they are in your name.

<u>Yr.</u>	<u>Make of Vehicle</u>	<u>Model Name</u>	<u>Color</u>	<u>Michigan License Plate #</u>
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

REASON FOR PARKING REQUEST:

Use back side of application if more room is needed

SIGNATURE OF APPLICANT: _____
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INSPECTION COMMENTS: _____

Recommended: Approval () Denial () _____
Inspecting Officer Date

Permits Are: Approved () Denied () _____
Chief/Deputy Chief of Police Date

\$50 FEE PER PERMIT

FEE PAID: _____

Permit(s) Issued: _____

Expired Date: _____