



City of Montpelier Police Department



Anthony J. Facos
Chief of Police

PARKING PERMIT APPLICATIONS

PERMIT # _____ PERMIT LOT _____

NAME: _____

MAILING ADDRESS: _____

BILLING ADDRESS: _____

DAY TIME PHONE # _____ Cell # _____

LICENSE PLATE# _____ STATE: _____

MAKE: _____ MODEL: _____ COLOR: _____

*****OPTIONAL INFORMATION*****

DRIVERS LICENSE # _____ STATE: _____

HOME PHONE # _____

EMAIL ADDRESS _____