

Village of Rockville Centre

ONE YEAR PERMIT - EFFECTIVE PERIOD
NOVEMBER 1 TO OCTOBER 31

INSTRUCTIONS FOR PARKING PERMIT APPLICATION

Enclosed is your Renewal application for one year parking permit.
Verify all information carefully. All corrections should be made in
the area provided to the right of the computer printed data.

\$257.00 11/1 through 4/30
\$128.50 5/1 through 10/31
Payable by CASH OR CHECK ONLY
All applications must be completed by the
Employee as well as the Employer.
This includes the notarized affidavit.

EMPLOYEE PARKING PERMIT APPLICATION

Sign application. enclose check payable to Village of
Rockville Centre for fee printed on enclosed application
and return in the enclosed envelope.

**"PLEASE MAIL APPLICATION, DO NOT COME TO
VILLAGE HALL."**

CHANGE OF LICENSE PLATE NO. will require a copy
of your vehicle registration stub and parking permit.

MAIL EARLY to receive your renewal permit before
October 31 expiration. In this regard, please return your
application by mail as quickly as possible.

It is against the law to make a false statement on your
application.

Village of Rockville Centre.

Important information
on back of form
- READ AND SIGN -



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on back of form
- READ AND SIGN -

▲ DETACH AT PERFORATION AND RETURN STUB WITH PAYMENT. ▲

EMPLOYER:

EMPLOYER NAME:

VEHICLE REG. NAME:

VEHICLE REG. STREET:

VEHICLE REG. CITY:

VEHICLE REG. STATE:

ZIP:

LIC. PLATE STATE:

LIC. PLATE #:

VEHICLE YEAR:

MAKE:

TYPE:

FEE \$:

PARKING PERMIT APPLICATION

COMPLETE BELOW FOR ANY CHANGES IN COMPUTER DATA

EMPLOYEE NAME

VEHICLE REG. NAME

VEHICLE REG. STREET ADDRESS

VEHICLE REG. CITY STATE ZIP

LIC. PLATE STATE LIC. PLATE #

VEHICLE YEAR MAKE TYPE

**TO: VILLAGE CLERK
VILLAGE OF ROCKVILLE CENTRE
ONE COLLEGE PLACE
ROCKVILLE CENTRE, NY 11570**

I hereby certify that the following person(s) is (are) employed by me in my place of business located in the Village of Rockville Centre, New York 11570, and I understand that if there are any false statements made concerning this application for the EMPLOYEE PARKING PERMIT, parking privileges will be revoked.

EMPLOYEE: _____

HOME ADDRESS: _____

HOME PHONE: _____

BUSINESS NAME: _____

ADDRESS: _____

BUSINESS PHONE #: _____

AUTHORIZED SIGNATURE: _____

TITLE: _____

DATE: _____

MUST BE SIGNED BEFORE NOTARY PUBLIC

Sworn to before me this _____ day

of _____.

NOTARY PUBLIC