

BOROUGH OF GARWOOD

Residential Preferential Permit Parking Application

JAMES H. WRIGHT, CHIEF OF POLICE

CHRISTINA M. ARIEMMA, BOROUGH ADMINISTRATOR/CLERK

403 SOUTH AVE

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NAME: _____ DATE: _____

ADDRESS: _____

PHONE/HOME: _____ WORK: _____

E-MAIL ADDRESS: _____

VEHICLES:

LIC. PLATE # _____ REGISTRATION# _____

YEAR _____ MAKE _____ MODEL _____

.....
LIC. PLATE # _____ REGISTRATION# _____

YEAR _____ MAKE _____ MODEL _____

.....
LIC. PLATE # _____ REGISTRATION# _____

YEAR _____ MAKE _____ MODEL _____

.....
PLEASE DO NOT WRITE BELOW THIS LINE, THIS IS FOR BOROUGH USE ONLY.

PROOF VEHICLE(S) ARE REGISTERED TO ADDRESS ON APPLICATION (YES) (NO) _____

Parking Permit #: _____

Visitor's Permit #: _____

Date: _____

Issued by: _____