

## DECAL PARKING PERMIT BOROUGH OF SOMERVILLE

|                         |                      |                |   |
|-------------------------|----------------------|----------------|---|
| NAME: (Applicant) _____ | STREET ADDRESS _____ | APT _____      | <b>PLEASE<br/>PRINT<br/>INFORMATION</b> |
| TELEPHONE NO _____      | STATE _____          | ZIP CODE _____ |   |
| _____                   | _____                | _____          |   |

**CAR NO. 1:**  
 LICENSE PLATE NO. \_\_\_\_\_ NAME OWNER \_\_\_\_\_  
 MAKE CAR \_\_\_\_\_ YEAR \_\_\_\_\_ MODEL \_\_\_\_\_ COLOR \_\_\_\_\_

**CAR NO. 2:**  
 LICENSE PLATE NO. \_\_\_\_\_ NAME OWNER \_\_\_\_\_  
 MAKE CAR \_\_\_\_\_ YEAR \_\_\_\_\_ MODEL \_\_\_\_\_ COLOR \_\_\_\_\_

**CAR NO. 3:**  
 LICENSE PLATE NO. \_\_\_\_\_ NAME OWNER \_\_\_\_\_  
 MAKE CAR \_\_\_\_\_ YEAR \_\_\_\_\_ MODEL \_\_\_\_\_ COLOR \_\_\_\_\_

I CERTIFY THAT THE ABOVE VEHICLE IS OWNED OR OPERATED BY A MEMBER OF MY HOUSEHOLD ON A REGULAR BASIS AND THAT I RESIDE AT THE ADDRESS SHOWN ABOVE

SIGNATURE \_\_\_\_\_

| DO NOT WRITE BELOW - TO BE COMPLETED BY OFFICE CLERK |   |  |
|--|---|--|
| PROOF OF RESIDENCE                                   | LEASE <input type="checkbox"/><br>DEED <input type="checkbox"/> | DRIVERS LICENSE <input type="checkbox"/><br>OTHER <input type="checkbox"/> EXPLAIN _____ |
| PROOF OF LOCATION OF AUTO                            | REGISTRATION ADDRESS <input type="checkbox"/>                   | M.V. REGISTRATION SAME NAME AS APPLICANT <input type="checkbox"/>                        |
| OTHER <input type="checkbox"/><br>EXPLAIN _____      | RECEIPT OF ORDINANCE NO. 1030<br>RULES AND REGULATIONS _____    |  |
| DECAL PERMIT NO. _____<br>DATE ISSUED _____          | QUANTITY<br>AUTOS _____<br>VISITORS _____                       | CLERK'S INT.   |