



APPLICATION FOR PARKING PERMIT

FINANCE DEPARTMENT

1420 Miner Street
Des Plaines, IL 60016
P: 847.391.5300
desplaines.org

CHECK ONE: [] BUSINESS [] METRA COMMUTER

A. APPLICANT INFORMATION
APPLICANT/MANAGER DAY PHONE #
BUSINESS NAME
ADDRESS
CITY AND STATE ZIP CODE

B. VEHICLE INFORMATION (for COMMUTERS only)
YEAR, MAKE, MODEL LICENSE PLATE #
YEAR, MAKE, MODEL LICENSE PLATE #
YEAR, MAKE, MODEL LICENSE PLATE #

C. FEE / PERMIT INFORMATION
1. LOT ASSIGNMENT: [] LOT 2 [for Businesses/Employees] (Formerly known as Lot 1) [] LOT 6 [for Businesses] (Formerly known as Lot 11)
[] LOT 1 [for Metra Commuters] (Formerly known as Lot 4) [] LOT 7 [for Metra Commuters] (Formerly known as Lot 10) [] LOT 16 [for Businesses/Employees] (Formerly known as River/Perry lot)
If you are assigned to Lot 1, are you a reverse commuter? [] YES [] NO
2. MONTHS REQUESTED: _____
3. NUMBER OF MONTHS REQUESTED: _____ @ \$40.00 PER MONTH = \$ _____

D. CERTIFICATION
I certify the information provided in this application is true and accurate to the best of my knowledge. It is my responsibility to notify the City of any changes in the information provided on this application
I understand failure to display a current parking permit may result in the issuance of a violation. The registered vehicle owner will be responsible to remit payment for any violations issued for the vehicle.
Failure to remit payment for violations on a vehicle utilizing the parking permit or to obtain a valid parking permit each month may result in forfeiture of future permits.
SIGNATURE _____ DATE _____

OFFICE USE ONLY: PERMIT #: INITIALS DATE