



City of Sturgeon Bay
Request for On-Street Winter Parking Permit

Name: _____

Address: _____

Telephone Number: Home: _____ Work: _____

Year and Make of Vehicle: _____

Vehicle License Plate Number: _____ Color: _____

Explanation of Need for Parking Permit: _____

Have You Received a On-Street Parking Permit Before?: **YES** **NO** If So, When?: _____

\$50 for the season (December 1st—April 1st)

OR \$20 per month

Signature of Applicant: _____ Date: _____

Department of Public Works

Date

For Office Only	_____ APPROVED	_____ DENIED
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