



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?:

Signature of Applicant: _____ Date: _____

Department of Public Works Date

\$55 for the season (December 1st—April 1st)
OR \$28.00 per month

For Office Only _____ APPROVED _____ DENIED