



125 West Sixth Street • Blue Earth, MN 56013 • Phone 507-526-7336 • Fax 507-526-7352

## Parking Permit Application

Owner Name \_\_\_\_\_

Owner Address \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Owner Phone \_\_\_\_\_

Owner Driver's License Number \_\_\_\_\_

Vehicle Make \_\_\_\_\_

Vehicle Model \_\_\_\_\_

Vehicle License # \_\_\_\_\_

Location of Request (Be specific. You may attach a drawing)

\_\_\_\_\_  
\_\_\_\_\_

Reason for request (Be specific.)

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Applicant Signature

Shaded Area Below For Office Use Only

Permit #: \_\_\_\_\_

Permit Fee: \$ \_\_\_\_\_

Receipt#: \_\_\_\_\_

Approvals

Police Chief: \_\_\_\_\_

Clerk-Administrator: \_\_\_\_\_