



Office Use Only	
Issue Date: _____	By: _____
Form of Payment: _____	
Total Paid: \$ _____	Transaction#: _____
Permit# _____	Notes: _____

Caretaker Parking Permit Application

We seek to improve and preserve the quality of life in West New York and protect our Permit Holders from unreasonable burdens in gaining parking. The fee structure and limits on the number of Caretaker permits that can be issued are tools to help manage parking demand. Decisions regarding fees, limits, and enforcement have a direct impact in improving the parking situation in our neighborhoods.

PLEASE PRINT CLEARLY & COMPLETE ENTIRE APPLICATION. SIGN WHEN FINISHED.

Documentation from resident’s physician is required indicating the need of a caretaker. Resident must submit a valid driver’s license or ID showing the West New York address. Up to one Caretaker parking permit may be issued per resident, for the use of a caretaker of a resident. Applicant must submit a valid driver’s license, vehicle’s registration and insurance.

First Name: _____ Middle Initial: _____ Last Name: _____

Street Address: _____ Apt. #: _____

City: _____ State: _____ Zip Code: _____

Phone #: _____ E-mail: _____

Be the first to know! Sign me up for priority alerts from the Town of West New York!

All information is maintaining in strict compliance with New Jersey State Law and only used for emergency notifications or informational purposes

All vehicle information required. No permit will be issued if any information is left blank.

Name on Vehicle’s Registration: _____

License Plate: _____ State: _____

Year: _____ Make: _____ Model: _____ Color: _____

Caretaker parking permit cost \$15.00 p/year. A twelve-month caretaker permit will be valid for a period of one (1) year from the date and time it is first issued. Please read the Residential Program Policies to obtain pertinent information regarding permit requirements.

BY SIGNING BELOW, I SWEAR AND AFFIRM THAT I AM A RESIDENT OF THE TOWN OF WEST NEW YORK AND THAT I RESIDE IN THE PERMIT PARKING AREA. I further understand that any person who obtains a parking permit decal under false pretenses, or, who transfer such permit to another for use thereof shall be guilty of violating **TOWN OF WEST NEW YORK ORDINANCE 277-33 COUNTERFEITING.** Any individual committing the aforementioned act shall be subject to penalty of no less than two hundred and fifty (\$250.00) Dollars, but in no case more than five hundred (\$500.00) dollars, for each violation and/or imprisonment for not more than five days for each such violation. Such penalties for said violations are to be imposed by the Town of West New York Municipal Court. Permits are not transferable for use by any vehicle other than on registered with the parking permit.

BY SIGNING BELOW, I hereby swear, under penalty of perjury that I have no outstanding tickets in the Town of West New York and the above information is correct. I understand that **NO PERMIT WILL BE ISSUE UNTIL ALL SUMMONSES PENDING WITH THE TOWN OF WEST NEW YORK VIOLATIONS BUREAU ARE SETTLE.** By signing this document, I acknowledge that I have read and will comply with the rules and regulations, and will ensure that my visitor(s) understands the parking policies

APPLICANT SIGNATURE

DATE

A parking permit does not guarantee a parking space for our residents, but it does increase the chances of finding a parking space.

Thanks for the opportunity to serve you!

