



Borough of Red Bank

PARKING UTILITY
75 Chestnut Street
Red Bank, NJ 07701

Decal # 1 _____

Decal # 2 _____

Decal # 3 _____

Tel: (732) 345-8135
Fax: (732) 530-4718

APPLICATION FOR RESIDENTIAL PARKING DECAL

Name: _____

Address: _____ Phone (Home): _____

Driver License #: _____ Exp. Date: _____

VEHICLE INFORMATION

Make: _____ Make: _____ Make: _____

Color: _____ Color: _____ Color: _____

Plate: _____ Plate: _____ Plate: _____

Year: _____ Year: _____ Year: _____

Do you have space to park your vehicle upon the property where you reside?

Yes () No ()

I hereby certify that the above information is true. I acknowledge receipt of a copy of this application and agree to comply with the terms of the Borough's ordinances, as amended and supplemented, relative to residential parking.

Applicants Signature: _____

Date: ___/___/___

Parking Officer: _____

Date: ___/___/___