

EXTENDED PARKING PERMIT - TOWN LOT A - AIRPORT PARKING LOT

FILE NUMBER _____

Name: _____
(Last Name) (First Name)

Address: _____

(City) (State) (Zip Code)

Dates Requested: _____

Reason for Request for Extended Parking for Aviation Purposes Only and "N" Number: _____

Make/Model/Color and Year of Vehicle: _____

License Plate Number: _____

Amount Paid: \$ _____ Received by: _____ Date: _____

Cost of Extended Parking Permit for Lot A per Code of Ordinances §Section 185-16

Seasonal: 6 months: \$ 100.00 (Good from 5/1/ - 10/31/)

Annual: 12 months: \$ 150.00 (Good from 5/1/ - 4/30/)

THIS PERMIT WILL BE VALID ONLY FOR: _____ **TO** _____
(Start Date) (End Date)

Approved by Town Clerk: _____
(Signature of Town Clerk/Deputy Clerk) (Date)

Approved by Airport Manager: _____
(Signature of Airport Manager) (Date)

Please prominently display extended parking permit inside the windshield of your parked vehicle, on the driver's side where the permit can be clearly observed. *Schedule of Fees approved by Town Board December 22, 2015 for 2016*

In case we need to contact you, please provide the following information:

Phone #

_____ *(local)*

_____ *(residence)*

_____ *(cell phone)*

Email address: _____

Please note: This information will not be visible from your vehicle – the information will be on the inside, the blank side facing outward on the back.

Thank you.