



Borough of Phoenixville Parking Department
 351 Bridge Street
 Phoenixville, PA 19460
 610-933-8801 ext. 0
parking@phoenixville.org

Residential & Employee Electric Vehicle Parking Permit Application

Please Print Clearly and Complete All Relevant Areas

Please Check Box and Fill out the Appropriate Sections

EV Parking Residential Permit (Section 1 & 2)

EV Parking Employee Permit (Section 1, 2 & 3)

1. Personal Information

Name: _____ Date: _____
 Applicants Home Address: _____ Phone: _____
 City: _____ State: _____ Zip: _____
 Email: _____ @ _____

2. Vehicle Information

PA License Plate # _____ Year: _____ Make/Model: _____ Color: _____ Permit # _____
 PA License Plate # _____ Year: _____ Make/Model: _____ Color: _____ Permit # _____

3. Employment Information

Employer's Name: _____ Employer's Address: _____
 Employer's Phone Number: _____

Park at your own risk.

The Borough of Phoenixville is not responsible for damage or theft to vehicles or vehicles' content.

I declare the information on the application is true and correct.

I also acknowledge failure to properly display these permits may result in the issuance of a valid citation.

I declare that I have read and understand the statements above.

Applicant's Signature _____ Date _____

Office Use Only

Proof of Residency/Employment (Required Vehicle Registration, Driver's License & one other proof of residency/employment)

Vehicle Registration: _____ (Vin # and Exp)	Utility Bill Type: _____ (Name of Provider)
Drivers License: _____ State: _____ (Number, State, Exp.)	Financial Statement: _____ (Type of Statement)
Lease/ Rental Proof: _____ (Landlords name)	Employment Proof: _____ (Ex. pay stub)

Office Comments
