



**Borough of Phoenixville Parking Enforcement**

351 Bridge Street  
Phoenixville, PA 19460  
(610) 933-8801 Ext 210  
www.phoenixville.org

**Application for Residential & Employee Parking Permit**

**Lots # 1, 3 & 4 ONLY**

*Please Print Clearly and Complete All Relevant Areas*

**Please Check Box and Fill out the Appropriate Sections**

Lot Parking Residential Permit (Section 1 & 2)

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

**1. Personal Information**

Name: \_\_\_\_\_ Date: \_\_\_\_\_

Applicants Home Address: \_\_\_\_\_ Phone: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

**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)

Financial Statement: \_\_\_\_\_  
(Type of Statement)

Lease/ Rental Proof: \_\_\_\_\_  
(Landlords name)

Employment Proof: \_\_\_\_\_  
(Ex. pay stub)

**Office Comments**

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