

VILLAGE OF TARRYTOWN  
One Depot Plaza  
Tarrytown, NY 10591

[www.tarrytowngov.com](http://www.tarrytowngov.com)

RESIDENT PARKING PERMIT  
**Transfer Fee - \$5.00**  
Fee Schedule - See Below  
(914)631-7873 Phone  
(914)631-8770 Fax

Pursuant to the provisions of the Village Code regulating parking the undersigned, who resides within the corporate limits of the Village of Tarrytown, hereby makes application for the issuance of a permit to park the motor vehicle hereinafter described in parking areas designated and at times specified in the Village Code when space therein is available.

**Completed application & copy of registration(s) must be submitted to be processed or all will be returned.**

**PRINT CLEARLY**

Make checks payable to: ***Village of Tarrytown***

Name of Applicant: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ Zip Code \_\_\_\_\_

Home Phone # \_\_\_\_\_ Business Phone # \_\_\_\_\_

Vehicle #1 Plate # \_\_\_\_\_ State \_\_\_\_\_ Vehicle # 2 Plate # \_\_\_\_\_ State \_\_\_\_\_

Make \_\_\_\_\_ Make \_\_\_\_\_

Year \_\_\_\_\_ Year \_\_\_\_\_

Transfer: \$5.00 – Reason \_\_\_\_\_ Original Permit # \_\_\_\_\_

**E Mail-Required** \_\_\_\_\_

In which parking lots do you primarily use your permit \_\_\_ commuter train lots \_\_\_ downtown commercial lots.

The undersigned agrees that the Village of Tarrytown will not be liable for any loss or damage to the above described motor vehicle or its equipment while such motor vehicle is parked in any parking area in the Village. **This permit does not guarantee that a space will be available in parking areas designated. Under no circumstances will there be a refund either in full or part. Only the original permit hanging from the rear view mirror facing out is valid – remove permit before moving vehicle.**

The undersigned swears or affirms under penalties of perjury that he or she is a bona fide resident of the Village of Tarrytown, that he or she is the owner of the above described motor vehicle and that the foregoing statements are true.

\_\_\_\_\_  
**Signature of Applicant**

**UNDER NO CIRCUMSTANCES WILL TEMPORARY OR SUBSTITUTE PERMITS BE ISSUED**

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<u>Rate Schedule (Annual)</u>			
June	\$ 385	Dec.	\$ 290
July	370	Jan.	275
Aug.	355	Feb.	260
Sept.	340	March	245
Oct.	325	April	230
Nov	310	May	215

<u>Rate Schedule (Semi-Annual)</u>	
June	\$290
July	275
Aug	260
Sept	245
Oct	230
Nov	215

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**For Office Use Only:**

Permit Expire Date: 11/30/\_\_\_\_ 5/31/\_\_\_\_ New Permit # \_\_\_\_\_ Old Permit #: \_\_\_\_\_ (if transfer)

Issued By/Date \_\_\_\_\_ / \_\_\_\_\_ \$ \_\_\_\_\_ Received ( ) Cash ( ) Check