

VILLAGE OF TARRYTOWN

OFFICE OF THE TREASURER

One Depot Plaza, Tarrytown, NY 10591-3605

914-631-7873 / 914-631-8770 (Fax)

Dear Permit Holder:

There presently are two types of Business Permits. The first permit is for one car and attaches to your rear passenger side window. The second type of permit is a Business Carpool permit. That permit can be used if you would like more than one vehicle listed on your permit or you are a business and wish to purchase one with various employees' plate number listed for their use.

NOTE: THE CARPOOL PERMIT CAN ONLY BE USED FOR ONE CAR AT A TIME.

June 1st thru May 31st\$310.00 (1st vehicle)
Carpool is an additional \$55.00 per vehicle

June 1st thru November 30th..... \$250.00 (1st vehicle)
Carpool is an additional \$35.00 per vehicle

Please complete the correct form and return with check or money order payable to the Village of Tarrytown and mail to Village of Tarrytown, One Depot Plaza, Tarrytown, New York 10591. We now take credit cards and form is also on line.

If you have any questions please feel free to contact this office.

Sincerely,

James J. Hart,
Village Treasurer

VILLAGE OF TARRYTOWN
 One Depot Plaza
 TARRYTOWN, NY 10591
 (914) 631-7873 (914) 631-8770 (FAX)

BUSINESS PARKING PERMIT
***See Below for FEE SCHEDULE**
 www.tarrytowngov.com
 Transfer Fee \$5.00

To the Treasurer of the Village of Tarrytown:

Pursuant to the Provisions of the Village Code regulating parking the undersigned 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. **PRINT CLEARLY**

Applicant's Name _____

Applicant's Address _____

Applicant's City _____ Zip Code _____

BUSINESS NAME _____

BUSINESS ADDRESS _____

BUSINESS PHONE # _____

VEHICLE MAKE _____ YEAR _____ TYPE _____

COLOR _____ VEHICLE ID# _____

PLATE # _____ PLATE STATE _____

E-MAIL Required _____

TRANSFER, STATE ORIGINAL PERMIT #: _____ (Original permit **MUST** be returned)

TRANSFER REASON: _____ **E-Mail** _____

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.

The undersigned swears or affirms under penalties of perjury that he is the owner of the above described motor vehicle, and the foregoing statements are true.

Signature of Applicant

Rate Schedule (Annual)

Rate Schedule

| June-May | | | | First Half of Year | | Second Half of Year | |
|----------|-------|------|--------|--------------------|--------|---------------------|--------|
| June | \$310 | Dec. | \$250. | June | \$250. | Dec. | \$250. |
| July | 300 | Jan | 240 | July | 240 | Jan | 240 |
| Aug | 290 | Feb | 230 | Aug | 230 | Feb | 230 |
| Sept | 280 | Mar | 220 | Sept | 220 | Mar | 220 |
| Oct | 270 | Apr | 210 | Oct | 210 | Apr | 210 |
| Nov | 260 | May | 200 | Nov | 200 | May | 200 |

FOR OFFICE USE ONLY:

Permit Expiration Date _____ New Permit # _____ Old Permit #: _____
 (If transfer)

Issued By _____ Date Received _____ \$ _____ CASH () CHECK () CREDIT CARD ()

Only the original permit hanging from the rear view mirror facing out is valid.

2) NAME OF APPLICANT _____ Phone _____
ADDRESS OF APPLICANT _____
CITY, STATE AND ZIP CODE _____
VEHICLE MAKE _____ YEAR _____
PLATE # _____ STATE _____
SIGNATURE OF APPLICANT _____
E-Mail (Mandatory) _____

3) NAME OF APPLICANT _____ Phone _____
ADDRESS OF APPLICANT _____
CITY, STATE AND ZIP CODE _____
VEHICLE MAKE _____ YEAR _____
PLATE # _____ STATE _____
SIGNATURE OF APPLICANT _____
E-Mail (Mandatory) _____

4) NAME OF APPLICANT _____ Phone _____
ADDRESS OF APPLICANT _____
CITY, STATE AND ZIP CODE _____
VEHICLE MAKE _____ YEAR _____
PLATE # _____ STATE _____
SIGNATURE OF APPLICANT _____
E-Mail (Mandatory) _____

FOR OFFICE USE: Permit Expires _____ Permit No. _____
Fee Received _____ Permit Issued by _____
Date of Purchase _____ Check () Cash () () Credit Card