

**CITY OF SANIBEL
PARKING PERMIT APPLICATION**

DATE: _____ **[WE ACCEPT VISA/MASTERCARD]**

NAME:

LAST: _____ **FIRST:** _____

ADDRESS:

STREET: _____ **UNIT/APT#** _____

CITY: _____ **STATE:** _____ **ZIP:** _____

E-MAIL ADDRESS _____

TELEPHONE:

LOCAL: () _____ **OTHER:** () _____

D/L# _____ **LAST 4 OF S/S#** _____

VEHICLE:

1 YEAR: ____ **MAKE:** ____ **MODEL:** ____ **COLOR:** _____

2 YEAR: ____ **MAKE:** ____ **MODEL:** ____ **COLOR:** _____

1 LICENSE PLATE NUMBER: _____ **STATE:** _____

2 LICENSE PLATE NUMBER: _____ **STATE:** _____

1 PERMIT NUMBER: _____ **FEE:** _____

2 PERMIT NUMBER: _____ **FEE:** _____

TRANSFER FEE: _____

PERMIT TYPE: [A] [B] [BR] [C] [AC] [BC] (CIRCLE ONE)

CITY OF SANIBEL RESIDENT: I declare under penalty of perjury that Sanibel is my legal primary residence.

SIGNATURE: _____

NON-RESIDENT TAXPAYER: I declare under penalty of perjury that I am an owner in part of real property subject to and not exempt from taxation situated within the Sanibel corporate limits:

SIGNATURE: _____

VISITOR AND "C" PERMIT: I agree to abide by the parking restrictions of this permit.

SIGNATURE: _____