

TOWN OF ISLIP

Bay Shore Train Station Parking Permit Application

Applicant Information:							
Last Name: First Name:							
Address:							
City:		State:		Zip Code:			
Home Phone:		Email Address:					
Vehicle Information:							
License Plate No: Year:		Make:		el:	Color:		
Applicant must present a valid New York State Drivers license, New York State Vehicle Registration & Proof of Residency.							
The undersigned certifies the information provided is accurate and acknowledges that any permit issued is subject to the rules and regulations provided herein, on signage in the parking lots, and in the Town of Islip Uniform Traffic Ordinance. Applicant Signature: Date:							
Method of Payment							
			Cash		Transaction Amount:		
CHECK _#	Credit Card		(Office Transactions only - DO NOT MAIL CASH)		\$		
Fee Schedule: On or Before August 31st Islip Resident = \$90. On or After Septermber 1st: Islip Resident = \$30.	Islip Resident = \$90. Non Resident - \$250. Or After Septermber 1st: On or Before August 31st Town of Islip Mailing to: Municipal Parking Program 40 Nassau Ave.						
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		OVA/NI OFFICIAL	LICE ONLY				

TOWN OFFICIAL USE ONLY						
Permit #:	Date issued:	Office or Mail-in:	Authorized By:			