

**NORTH BERGEN PARKING AUTHORITY  
RESIDENTIAL PARKING PERMIT APPLICATION**

7224 Bergenline Avenue  
North Bergen, NJ 07047  
Phone: (201) 869-6200 Fax: (201) 453-8686

For Office Use Only:
Permit #: _____
Permit #: _____
Permit #: _____

NAME/  
Nombre: \_\_\_\_\_

ADDRESS/  
Dirección: \_\_\_\_\_

CITY / Ciudad: North Bergen STATE / Estado: NJ ZIP CODE / Codico Postal: 07047

HOME PHONE #/  
No. de Teléfono: \_\_\_\_\_ WORK PHONE #/  
No. de Trabajo: \_\_\_\_\_

CELL PHONE #/  
No. de Celular: \_\_\_\_\_ E-MAIL ADDRESS/  
Correo Electronico: \_\_\_\_\_

DRIVER'S LICENSE #/  
No. de Licencia de Conducir: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

VEHICLE IDENTIFICATION NUMBER (VIN #) /  
No. de Circulacion:(1): \_\_\_\_\_  
(2): \_\_\_\_\_  
(3): \_\_\_\_\_

I CERTIFY THAT UNDER PENALTY OF PERJURY THAT THE ABOVE INFORMATION IS TRUE./  
Yo certifico bajo pena de perjurio que esta información es verdadera.

**X** \_\_\_\_\_  
SIGNATURE/Firma DATE/Fecha

<b>CHECKS OR MONEY ORDERS SHOULD BE MADE PAYABLE TO THE NORTH BERGEN PARKING AUTHORITY</b> <i>Aceptamos Cheque o Giro Postal pagable al North Bergen Parking Authority</i> <b>CASH, IN THE FORM OF EXACT CHANGE, IS ONLY ACCEPTED DURING RENEWAL PERIODS</b> <i>Se acepta dinero en efectivo SOLAMENTE la cantidad exacta no daremos cambio durante renovación</i>
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\*\*\*\*\*DO NOT WRITE BELOW THIS LINE/No escribir despúes de esta linea\*\*\*\*\*

LICENSE PLATE #	MAKE	MODEL	YEAR	COLOR	PERMIT NO.

DRIVER'S LICENSE  REGISTRATION  UTILITY BILL(S)  LEASE/RENTAL AGREEMENT  INSURANCE

OTHER  \_\_\_\_\_ (COPY ATTACHED)

APPROVED BY: \_\_\_\_\_ FEE COLLECTED: \$ \_\_\_\_\_  CHECK \_\_\_\_\_  MONEY ORDER \_\_\_\_\_