

BOROUGH OF CHAMBERSBURG

100 S. Second Street, Chambersburg, PA 17201

(717) 264-5151

TRADESPERSON PARKING PERMIT APPLICATION

VEHICLE OWNER AS
STATED ON REGISTRATION: _____

**VEHICLE OWNER OR
OPERATOR'S
(if different than owner)
NAME/DRIVER LICENSE #:** _____

BUSINESS NAME: _____

BUSINESS ADDRESS: _____

ADDRESS AS STATED ON
REGISTRATION (IF DIFFERENT
FROM ABOVE): _____

BUSINESS PHONE #: _____

VEHICLE MAKE/MODEL: _____

VEHICLE LICENSE PLATE #: _____

PERMIT YEAR
(EXPIRES 12/31): _____

PLEASE MAKE CHECKS PAYABLE TO THE BOROUGH OF CHAMBERSBURG

OFFICE USE ONLY

COST: _____

TRADESPERSON PERMIT #: _____

PAYMENT AMOUNT: _____

PAYMENT TYPE: _____

DATE PAID: _____