

Menomonee Falls Police Department
Night Parking Permission Application

Date: _____

Name: _____

Address: _____

Phone Number: _____

VEHICLE INFORMATION

YEAR: _____ MAKE: _____ MODEL: _____

LICENSE PLATE: _____

LOCATION VEHICLE WILL BE PARKED: _____

REASON FOR THE REQUEST: (Limited space, no off-street parking, etc.)

READ:

- ***Vehicle's LICENSE PLATE must be valid, expiration up-to-date and register to the vehicle recorded on this application.***
- ***Parking window cling is only valid for the above vehicle.***
- ***Replacement window clings due to misuse or damage will result in an administrative fee of \$5.00 at the discretion of the department.***

OFFICE USE ONLY

Decal Number: _____ Date Processed: _____

PSS initials: _____

Vehicle registration: (Circle one) Current Expired Not Valid

Reason for denial: _____

