

**CITY OF MIDLAND POLICE DEPARTMENT  
RESIDENTIAL PARKING PERMIT APPLICATIONS**

(Gray areas is for office use only)

**Name:** \_\_\_\_\_

**Address:** \_\_\_\_\_

**Phone Number:** \_\_\_\_\_

**Vehicle #1**

**Permit#** \_\_\_\_\_

**Name of Vehicle Registration:** \_\_\_\_\_

**License Plate Number:** \_\_\_\_\_

**State:** \_\_\_\_\_

**Year, Make & Model of Vehicle:** \_\_\_\_\_

**Vehicle #2**

**Permit#** \_\_\_\_\_

**Name of Vehicle Registration:** \_\_\_\_\_

**License Plate Number:** \_\_\_\_\_

**State:** \_\_\_\_\_

**Year, Make & Model of Vehicle:** \_\_\_\_\_

**Vehicle #3**

**Permit#** \_\_\_\_\_

**Name of Vehicle Registration:** \_\_\_\_\_

**License Plate Number:** \_\_\_\_\_

**State:** \_\_\_\_\_

**Year, Make & Model of Vehicle:** \_\_\_\_\_

**Vehicle #4**

**Permit#** \_\_\_\_\_

**Name of Vehicle Registration:** \_\_\_\_\_

**License Plate Number:** \_\_\_\_\_

**State:** \_\_\_\_\_

**Year, Make & Model of Vehicle:** \_\_\_\_\_

**Vehicle #5**

**Permit#** \_\_\_\_\_

**Name of Vehicle Registration:** \_\_\_\_\_

**License Plate Number:** \_\_\_\_\_

**State:** \_\_\_\_\_

**Year, Make & Model of Vehicle:** \_\_\_\_\_

I, the undersigned applicant, understand that the City of Midland may check any of the information listed above to assure that the Parking Permit Program requirements have been met and that the above information is true and accurate. (First two permits are free- \$2.00 per permit there after)

**SIGNATURE:** \_\_\_\_\_ **DATE:** \_\_\_\_\_