

Village of Larchmont – Office of the Village Clerk

TEMPORARY PARKING – 2017

120 Larchmont Avenue, Larchmont, New York 10538

Phone: (914) 834-6230, Press 1



Option	Timeframe	Daily Rate
<input type="checkbox"/>	Day OR Night Please Circle One	\$10.00
<input type="checkbox"/>	Day AND Night	\$20.00

Lot	Location
<input type="checkbox"/>	Railroad Station – Lot #1
<input type="checkbox"/>	Railroad Station – Lot #3
<input type="checkbox"/>	General Parking – Except Railroad Station
<input type="checkbox"/>	Lot No. 8 (Current lot permit holders only)

Dates (Max. 2 weeks): From: _____ To: _____

Name _____ Daytime Phone _____

Address _____ City/State/Zip _____

Vehicle Plate # _____

Vehicle Description: Year _____ Make _____ Color _____

Certification (Must be signed below)

WARNING: Knowingly making a false written statement is punishable as a Class A misdemeanor pursuant to New York State Penal Law (“Penal Law”) Section 210.45. Submission of any forged or falsified written instrument is punishable under Penal Law Article 170 and may be punishable under other provisions of the Penal Law and federal law. Any permit illegally obtained will be revoked.

Certification: Pursuant to the provisions of the Village Ordinance regulating parking, the undersigned, **who resides within the corporate limits of the Village of Larchmont and who will be the driver of the motor vehicle described above**, hereby makes application for the issuance of a permit to park said vehicle in the parking area designated in said ordinance when space therein is available. The undersigned agrees that the Village of Larchmont will not be liable for any loss or damage to the above-described motor vehicle or its equipment occurring while such motor vehicle is parked in any parking area in said Village. ***It is understood that the Village of Larchmont does not, directly or indirectly guarantee, by the issuance of the permit herein applied for, that there will be parking space available in the parking areas designated in said ordinance.***

By submitting this application, I certify that the information contained in this application, and the supporting documents, are true and correct.

Signature of Applicant

For Office Use Only

Permit No. _____ CA CK CR Fee Paid \$ _____ Date Issued _____