



TOWNSHIP OF JACKSON

Municipal Building
95 West Veterans Highway
Jackson, New Jersey 08527
Phone: (732) 928-1200 Fax: (732) 928-4377



APPLICATION FOR PARKING PERMIT

For Municipal Use Only

RESIDENT _____	NO FEE	
NON-RESIDENT _____	Fee	= \$200.00
PICK UP _____	Duplicate Permit	= \$5.00
MAILED _____	Replacement Permit Fee	= \$3.00
	Temporary Permit Fee	= \$2.00
	One-Day Daily Fee	= \$10.00

Please Note: Parking permits are issued on a first come, first serve basis. There is no guarantee that a permit will be available if the application processes conducted through the mail. Attached is a copy of Township Ordinance #18-07 & Ordinance #06-14 setting forth the rules and regulations for the Park and Ride sites within the Township of Jackson

Permit Number: _____

Jackson Park & Ride – Industrial Way/Cedar Swamp Road

NOTE: AT TIME OF APPLICATION, THE APPLICANT SHALL PRESENT TO THE TOWNSHIP CLERK **CURRENT COPIES OF APPLICATION'S DRIVERS LICENSE, NJ MOTOR VEHICLE REGISTRATION& INSURANCE ID CARD** ON THE VEHICLE FOR WHICH THE PERMIT IS BEING ISSUED. FAILURE TO PROVIDE ALL INFORMATION WILL RESULT IN DENIAL OF PERMIT.

(Please Print below)

Date: _____

Signature of Applicant

NAME: _____

ADDRESS: _____

TELEPHONE: _____ email: _____

MOTOR VEHICLE INFORMATION: YEAR: _____ MAKE: _____

MODEL: _____ PLATE NO.: _____

PLEASE DO NOT WRITE BELOW LINE

I, Sandra Martin, RMC, CMR Township Clerk of Jackson Township in the County of Ocean, State of New Jersey, declare that the above referenced applicant has satisfied the requirements set forth in Ordinance #18-07 & Ordinance #06-14 regarding "PERMIT PARKING" within the Township of Jackson and is hereby issued a Parking Permit for the above noted location. This permit expires December 31st.

Date

Jackson Township Clerk's office