



**2016-2017 Winter Parking Application
On Street Parking Permit/Space**

Applicant's Name: _____

Applicant's Address: _____

Applicant's Email: _____ Applicant's Phone: _____

Property Location for Application if different from Applicant's Address:

Reason for Application: _____

I, the undersigned, understand the following:

- The fee is \$75 if the application is approved for on street parking.
- The completion of this application is not a guarantee of approval.
- The approval of this application is only valid for the assigned on street parking space as deemed by the City of Oswego.
- The approval of this application is only valid when the winter parking ban is in effect and subject to the laws, ordinances and regulations of the City of Oswego and the State of New York and that violations of these laws, ordinances and regulations constitute the revocation of this approval.

Applicant's Signature: _____

Application Date: _____

*****For Official Use Only*****

Councilor's Approval: _____ Ward # _____ Date: _____

Comment: _____

DPW Commissioner/Mayor Designee Approval: _____ Date: _____

On Street Parking Location: _____