



CITY OF FOREST CITY

305 NORTH CLARK STREET ■ P.O. BOX 346 ■ FOREST CITY, IA 50436
(641) 585-3574 ■ FAX (641) 585-4502

Permit Number: _____

Date: _____

Amt. Paid: _____

For Office Use Only

DOWNTOWN OVERNIGHT PARKING PERMIT APPLICATION

Landlord Name: _____

Landlord Address: _____

Tenant Name: _____

Tenant Address: _____

Tenant Phone #: _____

Tenant Vehicle: _____

Tenant License Plate: _____

- 1) I understand the Downtown Parking Regulations and will inform my tenant of the rules.
- 2) I understand that if the tenant's vehicle is parking in the overnight light after 7 am during a snow event, the vehicle will be towed at the owner's expense.
- 3) I understand that if the tenant parks in any other lot overnight other than the lot designated, the tenant's car will be towed at the owner's expense.

Landlord Signature