

Stroudsburg Borough APPLICATION FOR QUARTERLY PARKING

Please provide the following information for our records:

Name of Employer _____

Name of Permit Holder _____

Address _____

City, State, Zip _____

Daytime Phone # _____ Email _____

Vehicle # 1 Make & Model _____ Color _____ Plate # _____

Vehicle # 2 Make & Model _____ Color _____ Plate # _____

Vehicle # 3 Make & Model _____ Color _____ Plate # _____

____ Lot 2 Up Quarterly Rate - \$150
 ____ Lot 3 Quarterly Rate – Pay Station
 ____ Lot 4 Quarterly Rate - \$90
 ____ Lot 5 Quarterly rate - \$120

____ Lot 2 Down \$190 - Card # _____

There is a one-time \$20.00 deposit for the gate card required to access the lower level of Lot 2. If you allow your permit to expire in the lower level of Lot 2, your gate card will be turned off the next business day after expiration which will prohibit you from entering or exiting the parking lot.

Please note the following!!!

Permits are sold quarterly on a first come, first serve basis. Permits are available to purchase one month prior to the next quarter. Permits are non-refundable.

The Borough of Stroudsburg assumes no responsibility for personal injury, loss or damage to vehicle, equipment or contents. Rights to use this area are revocable at any time.

All vehicles must have a valid registration and inspection.

Permits will not be issued to anyone with unpaid parking tickets.

Failure to properly display your parking permit may result in a parking fine (Ord. 599, as added by Ord. 928, 10/21/10)

The Borough reserves the right to tow any vehicle from the lower level of Lot 2 for failure to remove the vehicle from the lot once the permit has expired.

By my signature below, I certify that I fully understand upon renting a parking space in the Stroudsburg Borough Parking Municipal Lots, that my parking permit is not transferable, and it may only be used by me in vehicles which I have registered above. I also acknowledge receiving a copy of the Municipal Lot Rules/Map. The Stroudsburg Borough is not responsible for items which are lost or stolen from your vehicle or damage to your vehicle while parked within the parking garage.

SIGNATURE: _____ DATE: _____

2024

2025

1st Qtr Initials _____ Date _____ Permit # _____

1st Qtr Initials _____ Date _____ Permit # _____

2nd Qtr Initials _____ Date _____ Permit # _____

2nd Qtr Initials _____ Date _____ Permit # _____

3rd Qtr Initials _____ Date _____ Permit # _____

3rd Qtr Initials _____ Date _____ Permit # _____

4th Qtr Initials _____ Date _____ Permit # _____

4th Qtr Initials _____ Date _____ Permit # _____