

CITY OF TOMAH DEPARTMENT OF PUBLIC WORKS

Office (608) 374-7431

Fax # (608) 374-7444

Temporary Parking Exemption Permit Application

Applicant Name: _____

Address: _____

City/State/Zip: _____

Phone: _____

Location of encroachment: _____

(Address of adjacent tax parcel)

Area to be occupied: Street Blvd Sidewalk Alley
(Circle all that apply)

Brief description of encroachment: Construction trailer Other (describe below)

Purpose or reason for permit request: _____

- **Parking exemption permits will be valid for up to 60 days.**
- **Vehicles which have a parking exemption permit are required to abide by other parking laws and ordinances including but not limited to alternate side parking, handicap parking, and no parking zones.**

Proposed Start Date: _____ Permit Expiration Date: _____

The applicant understands and agrees that this is only an application for permit. A Parking Exemption Permit will only be issued after approval from the City of Tomah Building Inspector or Director of Public Works.

Applicant signature _____ Date _____

Permit Issued By _____ Date: _____

For office use only