

## 2017 COMMUTER PARKING PERMIT APPLICATION

If you have any questions, please contact the Village of Glenview Police Records Division at 847-729-5000. Police Records is open Monday-Friday from 8:00 a.m. to 6:00 p.m. Please make checks payable to the "Village of Glenview" and remit to 2500 East Lake Avenue, Glenview, IL, 60026.

No refunds and no prorations permitted.

**1) Please select ONE Train Station:**

Downtown Glenview  
(1116 Depot Street)

OR

The Glen of North Glenview   
(3000 Old Willow Road)

**2) Please circle ONE - Primarily parking for: *Metra or Amtrak***

**3) Please select ONE appropriate permit type:**

Resident of <b>INCORPORATED</b> Glenview			Resident of <b>UNINCORPORATED</b> Glenview or Reside <b>OUTSIDE</b> Village Limits (Non-Resident)		
<input type="checkbox"/>	Annual (01/01 - 12/31)	\$300.00	<input type="checkbox"/>	Annual (01/01 - 12/31)	\$400.00
<input type="checkbox"/>	Semi-Annual (01/01 - 06/30)	\$150.00	<input type="checkbox"/>	Semi-Annual (01/01 - 06/30)	\$200.00
<input type="checkbox"/>	Semi-Annual (07/01 - 12/31)	\$150.00	<input type="checkbox"/>	Semi-Annual (07/01 - 12/31)	\$200.00
<input type="checkbox"/>	Motorcycle-Annual (01/01-12/31)	\$100.00	<input type="checkbox"/>	Motorcycle-Annual (01/01-12/31)	\$135.00

**3) CLEARLY PRINT Vehicle Information**

*\* The permit must be properly displayed in the rear window as instructed.*

*\* Each permit can only be used by one vehicle at a time; however, the permit is transferable between vehicles if registered below. Please list below the relevant information for vehicles in the household, under the ownership or care of the permit holder, which the permit may transfer between (up to 3).*

**EXAMPLE:**

Make Ford  
Model Explorer  
Color White



Make \_\_\_\_\_  
Model \_\_\_\_\_  
Color \_\_\_\_\_

License Plate # \_\_\_\_\_  
State \_\_\_\_\_

Motorcycle?  Yes or  No

Make \_\_\_\_\_  
Model \_\_\_\_\_  
Color \_\_\_\_\_

License Plate # \_\_\_\_\_  
State \_\_\_\_\_

Motorcycle?  Yes or  No

Make \_\_\_\_\_  
Model \_\_\_\_\_  
Color \_\_\_\_\_

License Plate # \_\_\_\_\_  
State \_\_\_\_\_

Motorcycle?  Yes or  No

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_

State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Phone: \_\_\_\_\_

Email: \_\_\_\_\_

Circle Type: Home / Mobile / Work

**FOR OFFICE USE ONLY:** Permit #: \_\_\_\_\_ Permit Expiration Date: \_\_\_\_\_  
Staff Initials: \_\_\_\_\_ Cash: \_\_\_\_\_ Check: \_\_\_\_\_ CC: \_\_\_\_\_