



TOWN OF REDINGTON BEACH RESIDENT BEACH PARKING PERMIT

Last Name

First Name

Street Address (Redington Beach)

Phone (Include Area Code)

Phone (Include Area Code)

Email address

Own: _____

Rent: _____

Live with Parents: _____

Vehicle Information

Year: _____ Make: _____ Model: _____ Lic. Plate No. _____

Year: _____ Make: _____ Model: _____ Lic. Plate No. _____

Resident Signature: _____

OFFICE USE ONLY

Permit No. _____

New Permit _____ Renewal _____

Replacement _____ Reason for replacement _____

DATE ISSUED: _____

EXPIRES: MARCH 31, 2021

TOWN OFFICIAL: _____