



CITY OF CAPE MAY

643 WASHINGTON ST.
CAPE MAY, NJ 08204
(609) 884-9525



PRIVATE DRIVEWAY PARKING AGREEMENT

I Understand and Agree That:

Parking of motor vehicles in front of private driveways shall be permitted whenever:

1. Both the motor vehicle and driveway involved are owned by the same person, or
2. The motor vehicle is owned by a member of the same household as the private driveway, or
3. The owner of the private driveway authorizes the parking of a motor vehicle in front of the private driveway.
4. And where such parking is not otherwise prohibited and the permitting thereof would not interfere with the normal flow of traffic. Such parking shall be permitted in the metered parking zones as established by this Chapter.
5. A completed application for a permit must be filed in the Office of the City Clerk by the person to whom the permit shall be issued.
6. A permit fee of twenty-five (\$25.00) dollars shall be paid at the time the application is filed
7. An owner of a private driveway shall be eligible to apply for up to three (3) permits for his own motor vehicles or for use by other parties authorized by the owner to park in front of the private driveway. Each member of the owner's household who owns a motor vehicle shall be eligible to apply for one (1) permit.
8. The permit shall be displayed prominently within the vehicle when it is parked so as to be seen from the middle of the street. (Dashboard – left driver's side of vehicle.)

Check to make sure your permit is in place before leaving your vehicle. Failure to have card on display will result in a **Traffic Summons and Court Appearance**.

Fees:

| | |
|-------------------|---------|
| Permit Each ----- | \$25.00 |
|-------------------|---------|

City Use Only

| |
|--|
| Permit #(s): _____ |
| Application Date: _____ |
| Issue Date: _____ |
| Receipt #: _____ Check #: _____ |
| Permit \$25.00 X _____ = Total \$ _____ |

| | |
|----------------------------------|---------------|
| _____ | |
| Name of Purchaser (Please Print) | Business Name |
| _____ | |
| Address | |
| _____ | |
| City / State / Zip | |
| _____ | |
| Telephone # | |
| _____ | |
| Signature of Purchaser | Date |