

BOROUGH OF SEASIDE PARK

1701 N Ocean Avenue, Seaside Park, NJ 08752

(732) 793-3700 | Fax: (732) 793-3737

Request to Remove a Restricted Parking Space

Name: _____ **Date of Request:** _____

Phone Number: _____

Street Address: _____

Reason for Request: _____

By signing below, I authorize the Borough of Seaside Park to remove my restricted parking space. If I would like a restricted parking space in the future, I understand that by signing this application, I will have to re-apply and pay the applicable fee.

Applicant Signature