



**City of Groton**  
**Police Department**  
 295 Meridian Street  
 Groton, Connecticut 06340-4040



**APPLICATION FOR RESIDENTIAL PARKING PERMIT**

Name	Email Address
Full Address	Phone Number

**PLEASE LIST UP TO TWO (2) VEHICLES REGISTERED TO THIS ADDRESS TO RECEIVE PERMITS**

Year Make and Model 1.	Vehicle Registration Plate and State
Name and Address of Principal Operator	Operator Driver's License Number and State of Issue
Year Make and Model 2.	Vehicle Registration Plate and State
Name and Address of Principal Operator	Operator Driver's License Number and State of Issue

<b>Care-Giver Information - Only for those Residents requiring Visiting Health Services</b>	
Year Make and Model 3.	Vehicle Registration Plate and State
Name and Address of Principal Operator	Operator Driver's License Number and State of Issue

I understand that this permit gives me no rights or privileges other than those contained in the *City of Groton Ordinances* relating to resident parking. I further understand this permit does not exempt me from any law or ordinance. This permit shall be subject to renewal annually on January 1<sup>ST</sup>.

**Failure to properly display parking permit may result in penalties to include ticketing and towing of vehicle (see Ord. 250a §4.3 and 4.4). The City of Groton is not responsible for lawful enforcement resulting from improper display of parking permits.**

\_\_\_\_\_  
Date

\_\_\_\_\_  
Applicant's Signature

**(FOR POLICE USE ONLY)**

Date received, Issued or Not Issued with Reason	
Permit Number	Permit Street

\_\_\_\_\_  
(for the Chief of Police)

\_\_\_\_\_  
Date

Voice: (860) 445-2451  
 FAX: (860) 448-1962  
 PoliceRecords@CityofGroton-CT.gov  
[www.cityofgroton.com](http://www.cityofgroton.com)