

**Minnetonka Police Department
Application
Temporary Parking Permit
Residential City Streets**

Location for Permit Parking: _____

Requesting Party: _____

Address: _____

Home Phone: _____ Work Phone: _____

Date of Event: _____ Time From: _____ to _____

Number of Permits Requested: _____

Reason for Permit Request:

Applicant accepts responsibility for the removal of and return of temporary no-parking signs to the police department after above-specified event.

I understand and will comply with Minnetonka City Ordinance 930.080.

Signature of Requesting Party

This Area for Official Use

Date Request Submitted: _____ Received By: _____

Assigned to: _____ Assigned by: _____

Approved _____ Disapproved _____

Reason: _____

Permits delivered to requesting party:

Remarks: _____
