



350 Hudson Avenue, Township of Washington, NJ 07676-4799  
Office of the Township Clerk, Susan Witkowski, RMC

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Phone: 201-664-4425

Fax: 201-664-8281

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### Commuter Parking Permit Application

*If you apply via mail, please include the following:*

- A copy of the applicant's license.
- A copy of each vehicle's registration (maximum of (2) two vehicles).
- A check for \$100 payable to the "Township of Washington."

The 2019 Commuter Tag will be mailed to you.

*If you apply in person, please bring the following to our office:*

- Applicant's license.
- Each vehicle's registration (maximum of (2) two vehicles).
- A check for \$100 payable to the "Township of Washington."

The 2019 Commuter Tag will be issued at that time.

Our office is open Monday – Friday 8:30 am – 4:30 pm.

No more than one permit shall be issued per address, the permit is restricted to residents of the Township of Washington and is not transferable.

Tag Number Assigned: \_\_\_\_\_

Township of Washington, Bergen County, New Jersey  
**Commuter Parking Permit Application 2019**  
*(please print clearly)*

Applicant Name: \_\_\_\_\_

Address: \_\_\_\_\_

Home Telephone # \_\_\_\_\_ Cell # \_\_\_\_\_

Email Address: \_\_\_\_\_

**Maximum of two (2) registered vehicles per address**

Applicant's Driver's License Number: \_\_\_\_\_

Expiration Date: \_\_\_\_\_

- Viewed Current Driver's License (in person)
- Copy included (Via Mail)

**Vehicle Number One:**

Year/Make/Model: \_\_\_\_\_

License Plate: \_\_\_\_\_ VIN Number: \_\_\_\_\_

- Viewed Current Vehicle Registration (in person)
- Copy included (Via Mail)

**Vehicle Number Two:**

Year/Make/Model: \_\_\_\_\_

License Plate \_\_\_\_\_ VIN Number: \_\_\_\_\_

- Viewed Current Vehicle Registration (in person)
- Copy included (Via Mail)

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

x \_\_\_\_\_  
Township Clerk

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***For Office Use Only***

- Via Mail
- In person

Annual Fee: \$100 Date Received: \_\_\_\_\_  Cash  Check # \_\_\_\_\_