

**INCORPORATED VILLAGE OF LYNBROOK**  
APPLICATION FOR AN EMPLOYEE PARKING LICENSE  
PURSUANT TO VILLAGE CODE, CHAPTER 240, ARTICLE VII

State of New York )  
County of Nassau )

To the Clerk of the Village of Lynbrook:  
The Undersigned hereby affirms to the truth of the following:

1. That I am employed within the corporate limits of the Village of Lynbrook, at the address set forth herein, and,
2. That I am the owner or the regular operator of the motor vehicle described below; and,
3. That I hereby request an Employee Parking License and,
4. I am employed at the below described place of business.  
(Phone No. provided)

**I understand that parking is first come- first served**

**DO NOT WRITE IN THIS SPACE**

Parking License No. \_\_\_\_\_

Expires: \_\_\_\_\_

Employee License Fee: \$ \_\_\_\_\_

**LOT # \_\_\_\_\_**

**INCORPORATED**  
**VILLAGE OF LYNBROOK**

Employee License Fee: \$ \_\_\_\_\_  
Pursuant to Village Code, Chapter 240,  
Article VII

Employee License No. \_\_\_\_\_  
Date of Issue: \_\_\_\_\_  
License Expires: \_\_\_\_\_

An employee parking license is hereby granted to:

Print Name: \_\_\_\_\_  
Residence Address: \_\_\_\_\_

Lynbrook, New York

To park the following described motor vehicle in the designated parking areas for the permitted periods as set forth in said local law and Board Resolution:

1. Make of Car: \_\_\_\_\_
2. Type of Car: \_\_\_\_\_
3. Auto License Plate No. \_\_\_\_\_  
State: \_\_\_\_\_

The Village assumes no responsibility for loss or damage to the above designated motor vehicle while the same is parked in a designated parking area.

Village Clerk \_\_\_\_\_

Not valid until dated, numbered and signed by the Village Clerk.  
Notice: Parking license sticker must be affixed to left side of rear bumper.

**LOT # \_\_\_\_\_**

**This permit is only valid in the parking lot chosen.**

Business/Employment information was:

( ) VERIFIED on / / by \_\_\_\_\_

( ) NOT VERIFIED: \_\_\_\_\_

Application for EMPLOYEE license

was: ( ) APPROVED ( ) DENIED

BY BOARD OF TRUSTEES ON

Signature of Applicant \_\_\_\_\_

Email address \_\_\_\_\_

12. Cell Phone # \_\_\_\_\_

13. Dated: \_\_\_\_\_ 14. \_\_\_\_\_

11. Business Phone # \_\_\_\_\_

10. Business Name & Address \_\_\_\_\_

9. Auto License Plate No. \_\_\_\_\_ State: \_\_\_\_\_

8. Type of Car: \_\_\_\_\_

6. Address: \_\_\_\_\_

5. Print Name: \_\_\_\_\_

7. Make of Car: \_\_\_\_\_