



BETHEL

2020 TRAIN PARKING PERMIT APPLICATION

NAME: _____

ADDRESS/TOWN: _____

PHONE #: _____ E-MAIL: _____

VEHICLE

COLOR/YEAR/MAKE/MODEL: _____

LICENSE PLATE: _____

Mail to: Bethel Town Clerk, 1 School Street, Bethel, CT. 06801

***PLEASE NOTE, SHOULD YOU SELL YOUR PERMIT TO A FRIEND OR ACQUAINTANCE

YOU MUST NOTIFY OUR OFFICE TO NOTE CHANGE FOR RENEWAL PURPOSES.

BELOW LINE TOWN CLERK USE ONLY:

PERMIT # ISSUED: _____ DATE: _____