

86 Main Street
East Hampton NY 11937

JERRY LARSEN, Mayor



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2025 Village Resident Parking Permit Application

Required Documentation

1. Completed Permit Application – one (1) application per address/homeowner
2. Photocopy of Vehicle Registration(s)
3. Self-Addressed Stamped Envelope

First Name: _____ Last Name: _____

Name of LLC, Trust, Corp., etc: _____

Email: _____ Cell: _____

Village Street Address: _____

Mailing Address: _____

***Please note: The mailing address provided is where the Resident Parking Permit will be mailed to if a Self-Addressed Stamped Return Envelope is NOT provided.**

Signature of Applicant

Date

Print Name of Applicant