



CITY OF MADEIRA BEACH  
300 MUNICIPAL DRIVE • MADEIRA BEACH, FLORIDA 33708  
PHONE (727) 391-9951 • FAX (727) 395-9361  
[www.madeirabeachfl.gov](http://www.madeirabeachfl.gov)



## RESIDENT PARKING PASS APPLICATION

*\*Please leave Resident Parking Pass # blank while completing this form.\**

Resident Parking Pass #: \_\_\_\_\_

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

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

\_\_\_\_\_  
Madeira Beach, FL 33708

Email Address: \_\_\_\_\_ Phone Number: \_\_\_\_\_

Vehicle Year: \_\_\_\_\_ Color/Make/Model/: \_\_\_\_\_

Tag #: \_\_\_\_\_ State: \_\_\_\_\_

I hereby certify that this vehicle is registered to me, and that I am a Madeira Beach resident. I understand that failure to satisfy these conditions will result in revocation of this resident parking permit.

\_\_\_\_\_  
*Resident Signature*

\_\_\_\_\_  
*Date*

Please check if motorcycle or scooter.

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### MAILING INSTRUCTIONS

Include a self-addressed stamped envelope **AND** proof of residency with a copy of one of the following:

- Driver's License
- Lease agreement (6 months or longer)
- Real estate tax bill
- Voter's registration card

You also **MUST** include a copy of your **vehicle registration**.

Upon completion, please mail to:      City of Madeira Beach  
300 Municipal Drive  
Madeira Beach, FL 33708