

Name of Company: _____

Number of Vehicles to be operated: _____

OWNER'S PERMIT NUMBER: 2017—_____

(To be completed by a town clerk)

PLEASE MAKE ADDITIONAL COPIES AS NEEDED.

<p style="text-align: center;"><u>VEHICLE 1</u></p> Make: _____ Model: _____ Color: _____ License Plate Number: _____ Passenger Capacity: _____ Year of Vehicle: _____	<p style="text-align: center;"><u>VEHICLE 2</u></p> Make: _____ Model: _____ Color: _____ License Plate Number: _____ Passenger Capacity: _____ Year of Vehicle: _____
<p style="text-align: center;"><u>VEHICLE 3</u></p> Make: _____ Model: _____ Color: _____ License Plate Number: _____ Passenger Capacity: _____ Year of Vehicle: _____	<p style="text-align: center;"><u>VEHICLE 4</u></p> Make: _____ Model: _____ Color: _____ License Plate Number: _____ Passenger Capacity: _____ Year of Vehicle: _____
<p style="text-align: center;"><u>VEHICLE 5</u></p> Make: _____ Model: _____ Color: _____ License Plate Number: _____ Passenger Capacity: _____ Year of Vehicle: _____	<p style="text-align: center;"><u>VEHICLE 6</u></p> Make: _____ Model: _____ Color: _____ License Plate Number: _____ Passenger Capacity: _____ Year of Vehicle: _____
<p style="text-align: center;"><u>VEHICLE 7</u></p> Make: _____ Model: _____ Color: _____ License Plate Number: _____ Passenger Capacity: _____ Year of Vehicle: _____	<p style="text-align: center;"><u>VEHICLE 8</u></p> Make: _____ Model: _____ Color: _____ License Plate Number: _____ Passenger Capacity: _____ Year of Vehicle: _____