Parking Restrictions Petition Cover Letter

City of Canton Engineering Department 110 Academy Street Canton, Georgia 30114

PETITION FOR PARKING RESTRICTIONS

WE THE UNDERSIGNED, ALL BEING PROPERTY OWNERS OF THE SUBDIVISION LEGALLY TITLED

DO HEREBY PETITION THROUGH OUR SUBDIVISON OR UNIT(S) FOR PARKING RESTRICTIONS.

SUBDIVISION TO BE AFFECTED JOIN IN THIS REQUEST.

SPECIAL NOTE

YOUR SIGNATURE ON THIS PETITION INDICATES THAT YOU HAVE READ AND FULLY UNDERSTAND ALL INFORMATION CONCERNING THE NEIGHBORHOOD PARKING CONTROL PROGRAM.

Personally appeared before me a Notary Public, the undersigned affiant, who says an oath that _______ is one of the subscribing witnesses to the within instrument; that each of said witnesses say the execution and delivery of the same by each grantor therein for the purpose set forth; and that each of said witnesses signed the same purported.

Sworn to and Subscribed before me,

this ______ day of ______, 20____

Subscribing Witness

Notary Public Cherokee County, State of Georgia Parking Restrictions Petition Form

City of Canton Neighborhood Parking Control Program

Subdivision Name

Signing this petition certifies that you have read and understand the Neighborhood Parking Control Program. Circle YES in support, NO if against, and signature must be as it appears on tax bill.

	YES NO Lot Number
Signature	
Print Name (Last, First)	Witness Signature
	YES NO Lot Number
Signature	
Print Name (Last, First)	Witness Signature
	YES NO Lot Number
Signature	
Print Name (Last, First)	Witness Signature
	YES NO Lot Number
Signature	
Print Name (Last, First)	Witness Signature
	YES NO Lot Number
Signature	
Print Name (Last, First)	Witness Signature
	YES NO Lot Number
Signature	
Print Name (Last, First)	Witness Signature
	YES NO Lot Number
Signature	
Print Name (Last, First)	Witness Signature
	YES NO Lot Number
Signature	
Print Name (Last, First)	Witness Signature