

ABANDONED/UNLICENSED VEHICLE PERMIT

No:

Date: _____

City of Michigan City

THIS PERMIT is granted to: _____

(name of driver – attach copy of drivers license)

(address)

(city, state, zip)

(telephone)

For the purpose of: Storage of Abandoned/Unlicensed Vehicle

Permit Valid until _____

(30 days from date of issue)

The undersigned agrees to conform to all laws statutes and ordinances affecting the City of Michigan City, Indiana.

Permit granted by: _____

*****THIS PERMIT IS NONRENEWAL AND
NONTRANSFERABLE AND MUST BE AFFIXED TO
DRIVER SIDE OF WINDSHIELD*****