



## Damaged Permit Form

**Please Print**

Permit Holder's Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Home Address: \_\_\_\_\_ Apartment # \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Home Telephone # \_\_\_\_\_ Mobile # \_\_\_\_\_

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

**Permit Information:**

City Permit # \_\_\_\_\_

State Permit # \_\_\_\_\_

Describe the damage to the permit:

---

---

---

---

\_\_\_\_\_  
Signature of Permit Holder/Parent/Guardian/Designee

Check One: ☐ Permit Holder ☐ Parent/Guardian ☐ Designee

\_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_  
Date

**Please note:** You must return the damaged permit with this form.