



TOWN OF KENT

TOWN OF KENT AUTHORIZATION FOR PARKING

NAME: _____

ADDRESS: _____

CONTACT # (if vehicle is not picked-up): _____

DATE OF VEHICLE PICK-UP: _____

MAKE OF VEHICLE: _____

PLATE #: _____

The undersigned hereby waives and releases any and all claims that I may have against the Town of Kent, Kent Board of Selectmen, their employees, agents and servants, which may be sustained as a result of vehicle parking at the Town Hall, offered by the Town of Kent. Furthermore, I agree to pay any and all charges for towing, if the vehicle is not picked-up by the above referenced date.

Signature

Date