

TOWN OF PORT ROYAL VEHICLE RESTORATION PERMIT
P.O. DRAWER 9
700 PARIS AVE
PORT ROYAL SC 29935-0009
(843) 986-2207

For Office Use Only

Date Requested: _____ / _____ / _____

Date Issued: _____ / _____ / _____

Permit #: _____

Name /Address of Registered Owner: _____

Phone Number: (_____) _____ - _____

Vehicle Storage Address: _____

District/ Map/ Parcel _____

Description of Vehicle:

Year : _____ Make: _____ Model: _____

VIN #: _____

DO NOT WRITE IN THIS SPACE—OFFICE USE ONLY

New Renew Zoning District: _____

License Fee: \$ _____ Receipt #: _____