



Barbara Skelton
Code Enforcement Director

PARKLET AFFIDAVIT

Date:

City of South Portland
c/o Code Enforcement Director
829 Sawyer Street
South Portland, ME 04106

The undersigned representatives, in application for a Parklet Permit from the City of South Portland, at the location noted below, make this statement and provide this Parklet Affidavit upon oath, that all parties understand and agree that Parklet operations are limited to the period between **APRIL 15** and **NOVEMBER 1** in each calendar year of the permit term.

Parklet Applicant:

Name (Printed) Signature Date

Business Owner:
(if different from Applicant)

Name (Printed) Signature Date