

Borough of New Cumberland



1120 MARKET STREET
P.O. BOX 220
NEW CUMBERLAND, PA 17070
PHONE: 774-0404
FAX: 774-8163

Request and Liability for No Parking Standards/Cones

NAME: _____

CURRENT ADDRESS: _____

MOVE-TO ADDRESS: _____

TELEPHONE: _____

DRIVER'S LICENSE NUMBER: _____

LENGTH OF TIME NEEDED: _____

I _____ am borrowing _____ amount of Cones and/or _____ amount
(Name) (# of cones) (# of standards)

of No Parking Standards from the New Cumberland Borough Highway Department and will return them on

_____ to the Highway garage, located at 1125 Market Street at _____.
(Date) (Time)

I am aware that if I do not return borrowed items that I will be liable for the replacement cost. The **current** rate for one (1) Cone is \$26.75 and No Parking Standards are \$50.00 each. A minimum of \$100 deposit will be required in advance. Your deposit will be held until such a time our equipment is returned.

SIGNATURE

DATE



\$26.75

\$15-

\$50-