



---

## RESIDENT VETERAN LIFETIME COMPLIMENTARY BEACH PASS APPLICATION

Passes will not be issued to Veterans 60 years of age or older. Scarborough Residents 60 years of age or older are entitled to a free resident senior beach pass each year.

NAME: \_\_\_\_\_ DATE OF BIRTH: \_\_\_\_\_

HOME ADDRESS: \_\_\_\_\_

TOWN/CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP CODE: \_\_\_\_\_

MAILING ADDRESS: \_\_\_\_\_

TOWN/CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP CODE: \_\_\_\_\_

PHONE NUMBER: \_\_\_\_\_ EMAIL: \_\_\_\_\_

DRIVER'S LICENSE NUMBER OR STATE ID NUMBER: \_\_\_\_\_

MILITARY SERVICE NUMBER: \_\_\_\_\_

---

Do you have an honorable discharge or general discharge under honorable conditions?  YES  NO

If yes, please attach a copy of your DD214 to this this application.

---

Resident Veteran Lifetime Complimentary Beach Passes are issued to the Veteran only. The Veteran must be present at the time of use at approved parking locations. Passes are non-transferable and may not be used by anyone other than the Veteran. Failure to abide by this will result in a loss of privileges.

I hereby certify my residence is that listed above and that I claim no other places of residency. I understand that falsification of any statement made on this application will result in the immediate revocation of my pass. I hereby confirm that the information contained in this application is true.

\_\_\_\_\_  
Applicant Signature

\_\_\_\_\_  
Date of Application

---

Date Received: \_\_\_\_\_

Received by: \_\_\_\_\_

Pass Number \_\_\_\_\_