

**APPLICATION
CITY OF STAMFORD – GOLF PERMIT**

Date:

Permit Number TM
Permit Type TM

NOTE:

1. ALL APPLICANTS MUST BE RESIDENTS AND DOMICILED IN THE CITY OF STAMFORD.
2. TENANT LEASES WILL NOT BE CONSIDERED ACCEPTABLE.
3. TAX BILLS ARE NOT ACCEPTABLE AS PROOF OF RESIDENCY

APPLICANT:
(Print)

Name: _____
(Last) (First) (Middle Initial)

Street Address: _____

City: _____ Zip Code: _____

Telephone #: _____ E-Mail Address: _____

Qualification – Identification

The City of Stamford requires a **minimum** of **two** supporting items of identification. One must be a Photo ID.

Qualifying identification source(s) are as follows:

(Check appropriate box)

- Photo ID**
- CT Driver's License (Stamford) -----
 - Photo Credit Card with Address -----
 - Other Photo Identification (List) -----

(Check appropriate box)

Additional supporting identification: (must show Applicant's resident address)

- Telephone, Utility or Cable Bill -----
- Bank/Credit Card Statement -----
- Other (List) -----

I, the undersigned applicant, declare that the information provided as proof of qualification for a City of Stamford Golf permit is true and bonifide proof. I also understand that should this information, herewith attested to, be determined as not true, or falsified in any way, that such permit will be canceled and recreational privileges as obtained via this permit will be revoked at both E. Gaynor Brennan and the Sterling Farms Golf Facilities.

The City of Stamford and/or The E. Gaynor Brennan Golf Facility reserves the right to require additional information to verify the validity of this application.

Signature of Applicant

Issuing Agent