

**City of Grosse Pointe Farms  
Parks & Recreation Department  
(313) 343-2405**

**Application for Temporary Non-Resident Park Pass**

- Temporary Non-Resident Park Passes are issued to persons that will be staying with a resident of Grosse Pointe Farms for an extended period of time (not less than one week).
- Persons issued a Temporary Non-Resident Park Pass must present the Park Pass and identification (such as a driver's license) to the front gate attendant for each entry into Pier Park.
- Temporary Non-Resident Park Passes will have a specific expiration date.
- Temporary Non-Resident Park Passes will not be issued to non-residents living in Wayne, Macomb, or Oakland Counties.
- Only one Temporary Non-Resident Park Pass will be issued to each visiting family (household) or individual.
- Temporary Non-Resident Park Pass applications must be filled out completely and returned by mail or in person to the Parks and Recreation Office, Pier Park, 350 Lakeshore Road, Grosse Pointe Farms, Michigan 48236 and accompanied with the \$5.00 Temporary Non-Resident Park Pass fee. Make checks payable to City of Grosse Pointe Farms.
- Requests for Temporary Non-Resident Park Passes should be submitted for processing no later than one week prior to the proposed guests' use of the Pier Park.
- Lost Temporary Non-Resident Park Passes can be replaced at the Parks and Recreation Office. Replacement requests are limited to no more than two per year. The administrative charge for the first replacement Park Pass is \$10, and \$20 for the second replacement Temporary Non-Resident Park Pass.
- Temporary Non-Resident Park Pass applications must be completed by an adult, resident, 21 years of age or older, requesting the Temporary Non-Resident Park Pass and, if approved, will be mailed to the applicant after processing.
- There are no guest privileges for Temporary Non-Resident Park Passes.

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

New Pass (\$5.00)

Replacement Pass #1 (\$10.00)

Replacement Pass #2 (\$20.00)

**Temporary Non-Resident Information**

Male\_\_\_\_\_

Female\_\_\_\_\_

\_\_\_\_\_  
Name of Temporary Non-Resident

\_\_\_\_\_  
Street Address

\_\_\_\_\_  
City

\_\_\_\_\_  
State

\_\_\_\_\_  
Zip

\_\_\_\_\_  
Phone Number

\_\_\_\_\_  
Birthdate

Length of Visit ≈ From (Month/Day/Yr.) \_\_\_\_\_

To (Month/Day/Yr.) \_\_\_\_\_

**Resident Information**

\_\_\_\_\_  
Name

\_\_\_\_\_  
Birthdate

\_\_\_\_\_  
Address

\_\_\_\_\_  
Phone Number

I have read the rules pertaining to this application and agree to abide to all conditions.

\_\_\_\_\_  
Signature of Resident

\_\_\_\_\_  
Date

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Do Not Write Below – For Office Use Only

Check # \_\_\_\_\_

Cash

Date Mailed \_\_\_\_\_

Approved By \_\_\_\_\_

Date \_\_\_\_\_