

RE- ENTRY TAG NUMBER _____
(FOR STAFF USE ONLY)



RESIDENT POST DISASTER RE-ENTRY TAG APPLICATION
City of Anna Maria
P.O. Box 779 ~ 10005 Gulf Drive
Anna Maria, FL 34216
Phone: (941) 708-6130

Please complete the following information and bring it to Anna Maria City Hall along with one (1) picture identification (i.e. Driver's License) and one (1) proof of physical address (Voter ID card, utility bill, property rental agreement, etc.). Proof must list the physical address of the property where you reside in the City of Anna Maria.

NAME _____

ADDRESS (actual number and street name) _____

MAILING ADDRESS _____

PHONE _____ ALTERNATE PHONE _____

SPECIAL EVACUATION NEEDS _____

The individual named above is a resident of this city and is being issued a post disaster re-entry tag. Only one (1) tag will be issued per residence, regardless of the number of vehicles owned by that household. If the resident moves, the re-entry tag should be returned to Anna Maria City Hall. Registration information provided above is for the use of City and other public officials, and is considered to be public information subject to the terms and limitations of Florida Statute 119 F.S.

Resident Signature Date City Authorized Signature Date