



Residential Parking Permit Application

No. _____
(For Office Use Only)

Date _____

Permit Type: _____

Permits Fee \$ _____.

License Plate: _____

State: _____

Vehicle Make: _____

Vehicle Model: _____

Vehicle Color: _____

Vehicle Type: _____

Permit User First Name: _____

Permit User Last Name: _____

Address: _____

City: _____ State: _____

Zip Code: _____

Email Address: _____

Phone #: _____

All permit applications will need to be submitted with a copy of your Driver's License*, valid insurance card, and vehicle registration.

***If your current address is not on your driver's license, you will not be able to purchase a permit until you have a driver's license address change completed and submitted with your driver's license. Exceptions due to secondary residence or use of another person's vehicle will be evaluated individually and additional documentation will be required to determine eligibility for a residential parking permit.**

Applicant Signature

Permit Administrator Signature

FOR INTERNAL USE ONLY

DL

Insurance

Registration

Approved By: _____

Entered: _____

Check #: _____

CC Auth Code: _____