ZONE F RESIDENT AREA PARKING PERMIT APPLICATION

1. APPLICANT INFORMATION

Name: ____________________________________________________________
Address: _________________________________________________________
Phone: __________________________ Email: ___________________________

If you are renting, provide the name and phone number of your landlord or manager:
__________________________________________ ______________________
Landlord/Manager Name Phone

☐ Check here if you own the property

2. SELECT NUMBER AND TYPE OF PERMITS

Annual permits are valid January – December 31.

<table>
<thead>
<tr>
<th>Permit Type</th>
<th>Quantity</th>
<th>Cost Each</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>Annual Resident Permit (vehicle specific; non-transferable)</td>
<td></td>
<td></td>
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<tr>
<td>$75.00 each. Pro-rated to $37.50 after July 1.</td>
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<tr>
<td>Annual Guest Permit (maximum 1 per address)</td>
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<td></td>
<td></td>
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<tr>
<td>$75.00 each. Pro-rated to $37.50 after July 1.</td>
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</tbody>
</table>

TOTAL

3. SUPPORTING DOCUMENTATION

Please read the following carefully, and attach the required documentation to your application.

a. Proof of Residence

All applicants must provide proof of residence for the address listed in Section 1. Acceptable items for proof are a rental agreement or lease, bank statement, credit card bill, or utility bill.

This proof must be dated within the past 30 days and include your name and your address. Proof provided will be subject to verification.

b. Vehicle Registration

You must provide current, state-issued vehicle registration for each resident or motorcycle permit you wish to purchase. The last name on the registration must match the last name of the applicant in Section 1.

c. Off-street Parking Form

The number of off-street parking spaces (e.g. a garage) available to you reduces the number of permits for which you are eligible. Please complete and sign the attached Zone F off-street parking form.

READ AND SIGN ON REVERSE

FOR OFFICE USE ONLY

Permit Number(s): __________________________ Invoice Number: __________________________
4. ADDITIONAL RESIDENTS

Please list all legal residents at the address shown in Section 1. Any tenant not listed as living at the address on this application will have their permit cancelled.

________________________________________________________________________
________________________________________________________________________

5. SIGNATURE

By applying for this permit and signing the application, the undersigned agrees to the following:

- All the information on this form (and any supplemental information I have provided) is true and correct.
- If my permit is lost or stolen, or if my license plate number changes, I will pay a replacement permit fee.
- I authorize the parking permit program administrator to verify any information contained herein, and I authorize my landlord to release such information as to authenticate my place of residence.
- To assign any guest permits I obtain to persons only during periods when they are actually visiting at my home.
- To immediately surrender any rights to use any permit(s) if I move outside of the permit area.
- If I move within the permit area, including within the same apartment building or complex, I agree to notify the Bureau of Transportation within three (3) days in order to continue using my permit(s).
- All permits remain the property of the City of Portland and will be revoked if improper use is demonstrated.

Signature ___________________________ Date ________________

PAYMENT METHOD

To expedite processing, make check or money order payable to City of Portland.

To pay by credit card, check here ☐ and provide email address: _____________________________.

You will receive an invoice from Portland Parks and Recreation requesting payment by credit card for your parking permit. Please allow an additional 5-7 business days for processing if paying by credit card. If an email address is not provided, your application will be returned to you.

Mail completed application, required documents and payment to:
PBOT Parking Permits, 1120 SW 5th Ave, #1331
Portland, OR 97204

Customer Service Address: 1120 SW 5th Ave, Ste. #100
Open Monday through Friday from 8am – 5pm. Closed last Thursday of the month from 1pm – 5pm.
Fax: 503-865-3283

Incomplete or illegible applications will be returned.
Questions? Call 503-823-2777
In the interest of preserving the livability of your neighborhood, your Neighborhood Association and Parking Committee requires all applicants in Zones F, H and I to declare the number of available off-street parking spaces. The number of resident permits allowed per address will be reduced proportionately by the number of off-street parking spaces. This does not affect guest permit allotment.

Off-street Parking Space Definition
An off-street parking space includes parking lots, parking structures, garages, carports, driveways without carports or garages, and any other legal parking space on private property.

Please complete the following information:
Number of vehicles owned at this address: ______________________
Number of off-street spaces available: ______________________

I confirm that the information above is true and correct

_________________________________________  ____________
Applicant Signature  Date

Please complete, sign and return this form along with your completed application, payment, and required proofs. Applications submitted without this information will be returned. Information provided on this form will be subject to random verification. If you have any questions regarding this rule or completing this form, please call the APPP team at (503) 823-2777.