ZONE A

GOOSE HOLLOW RESIDENT APPLICATION

Permit Year February 1 – January 31

AREA PARKING PERMITS ISSUED BY MAIL ONLY

Please Complete the Following Information:

Name _____

Address _____ Apt #

Portland OR 972_____ Work Phone _____ Home Phone _____

ALL APPLICANTS **must provide a copy of one of the following proofs of residence**: bank statement, credit card bill, rental agreement. *(Please black out your account numbers and any other information that you wish to keep confidential.) This proof* ***must*** *be dated within the* ***past 30 days*** *and must include your name and your address. Proof provided will be subject to verification. If you are renting, you are required to provide the name and phone number of your landlord or manager.*
Check here if you own the property _____.

_____

Landlord/Manager Phone

EACH PERMIT COSTS $60 FOR THE PERMIT YEAR; AFTER 8/1 PAY ONLY $30.

RESIDENT PERMITS-You must attach a *legible* photocopy of the **vehicle registration** for each vehicle for which you are requesting a permit. *Vehicle must be registered in your name*....._____ = $

MOTORCYCLES-require a permit that attaches to the outside (Attach DMV Registration)....._____ = $_____

TO ORDER SINGLE-DAY SCRATCH OFF PERMITS:
May order up to 3 books at any one time....._____ = $ _____
There are 10 permits per book @ $10 per book.
Maximum of 12 books per address per permit year. **TOTAL** _____ = $_____

Please Read and Sign on Reverse

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FOR OFFICE USE ONLY

Permit #	License #	Permit #	License #

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.
- I authorize the parking permit program administrator to verify any information contained here in, 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 Program Administrator (at the phone number listed below) within **3 days** in order to continue to use my permit(s).
- All permits remain the property of the City of Portland and will be revoked if improper use is demonstrated.

NEW APPLICANT OCCUPANCY STATEMENT

(**MUST** be completed)

I am notifying you that the only legal residents at _____ Apt #
(Your address)

are: _____
(Please print clearly)

_____

ANY TENANT NOT LISTED AS LIVING AT THE ADDRESS SPECIFIED ABOVE WILL HAVE THEIR PERMIT CANCELLED.

_____ _____

I swear or affirm that the information on this application is true and correct. DATE

Mail completed application, required proof, Vehicle registration, and check or moneyorder (made payable to City of Portland) to: PPR/Customer Service, 1120 SW 5th Avenue Room 1302, Portland OR 97204 : If you have any questions call (503) 823-6841 or (503) 823-7190

Make checks or money orders payable to City of Portland.

To Pay with Visa or MasterCard, please enter your card information in the spaces provided below.

Credit Card charges will read "Portland Parks and Recreation" Card expiration date____/____/____

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Name on Card_____