ZONE G
HOMESTEAD RESIDENT APPLICATION

Permit Year is May 1 – April 30

Resident Information:

Name _____

Address _____ Apt # _____

Portland OR 972_____ Work Phone _____ Home Phone _____

ALL APPLICANTS must provide a proof of residence, examples are: utility bill, 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 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

ANNUAL PERMITS ARE $70 FROM MAY 1 – OCT 31; PRORATED TO ½ PRICE AFTER NOV 1

RESIDENT PERMITS - Attach a *legible* photocopy of the **vehicle registration** for each vehicle for which you are requesting a permit.
*Last name on the registration must match the name on the application..*_____@ *$70/$35* = $_____

MOTORCYCLES - Attach a *legible* photocopy of the **motorcycle registration**, the permit will attach to the outside of the motorcycle.
*Last name on the registration must match the name on the application..*_____@ *$70/$35* = $_____

GUEST PERMIT - Maximum one per address......_____@ *$70/$35* = $_____

SINGLE-DAY SCRATCH OFF PERMITS
There are 10 permits per book @ $10 per book....._____@ *$10/book* = $_____

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 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 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.

APPLICANT OCCUPANCY STATEMENT

(Required for all applicants)

I confirm 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 payment to:
PPR/Customer Service, 1120 SW 5th Avenue Room 1302, Portland OR 97204
Applications submitted without complete information will be returned.
For questions, call (503) 823-2777

AREA PARKING PERMITS ISSUED BY MAIL ONLY

Make checks or money orders payable to City of Portland.
To Pay with Visa, MasterCard or American Express, 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_____