City of Portland Carpool
1120 SW 5th Ave, Room 800
Portland OR 97204
(503) 823-2777

Application for Carpool Parking Permit

For: DOWNTOWN ON-STREET

Instructions: Each member must complete and sign this application. Enclose a proof of residence for each member (such as a copy of a utility bill). Carpool participants attending school (college, high school, or trade schools) must also attach enrollment verification and school hours from their school.

The downtown on-street monthly carpool parking fee is $115. The fee is per carpool, not per person. Payment must be received by the 20th of the month previous to when you wish to begin. Please do not send cash.

Make check or money order payable to City of Portland. Return your application to:

City of Portland Carpool Program, 1120 SW 5th Ave, Suite 800, Portland OR 97204

Contact Person: Name _____

Home Address _____
Please provide proof (such as utility bill)

City _____ Zip _____

Employer/School _____ Home Phone _____

Work Address _____ Work Phone _____

Driver's License Number _____ State _____ Work Hours _____

Vehicle License Plate # _____ Make _____ Model _____

Employer's Phone (HR Dept) _____

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Other Carpool Members: Name _____

Home Address _____
Please provide proof (such as utility bill)

City _____ Zip _____

Employer/School _____ Home Phone _____

Work Address _____ Work Phone _____

Driver's License Number _____ State _____ Work Hours _____

Vehicle License Plate # _____ Make _____ Model _____

Employer's Phone (HR Dept) _____

Other Carpool Members: Name _____

Home Address _____
Please provide proof (such as utility bill)

City _____ Zip _____

Employer/School _____ Home Phone _____

Work Address _____ Work Phone _____

Driver's License Number _____ State _____ Work Hours _____

Vehicle License Plate # _____ Make _____ Model _____

Employer's Phone (HR Dept) _____

Other Carpool Members: Name _____

Home Address _____
Please provide proof (such as utility bill)

City _____ Zip _____

Employer/School _____ Home Phone _____

Work Address _____ Work Phone _____

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We certify, as members of a carpool, that we have individually read the policies and procedures regarding the Portland Bureau of Transportation administered carpool parking programs. We understand that policy compliance will assure continuance in the program. Abuse of these policies may result in being dropped from the program and being ineligible to participate in any carpool parking program administered by the Portland Bureau of Transportation for a minimum of one year. The Portland Bureau of Transportation Parking Operations Staff may verify employment, work hours and any other pertinent information on the carpool application and subsequent renewal forms.

We authorize the City of Portland carpool program to verify any information contained herein, and I authorize my employer to verify my employment.

Signature Date

Signature Date

Signature Date

Signature Date