

PBOT

PORTLAND BUREAU OF TRANSPORTATION

ZONE B

BUSINESS AREA PARKING PERMIT APPLICATION

1. APPLICANT INFORMATION

Business Name: _____

Business Address: _____

Mailing Address: _____

Contact Name: _____

Phone: _____ Email: _____

2. CALCULATE NUMBER OF PERMITS

The number of annual business permits available to your business is calculated from the payroll information you submit. Zone B businesses may purchase up to 50% of the total FTE. To calculate your allotment:

- Add total number of employee hours per week (maximum 40 per employee): _____
- Divide total number of hours by 40: _____ This is your total FTE.
- Multiply total FTE by .5 and round up: _____ This is your maximum number of permits.

3. SELECT NUMBER AND TYPE OF PERMITS

Annual permits are valid September 1 – August 31.

Permit Type	Quantity	Cost Each	Total
Annual Business Permit (maximum as determined in section 2) \$60.00 each. Pro-rated to \$30 after March 1.			
Daily Scratch Off Permits \$10 for a book of 10		\$10.00	
		TOTAL	

4. SUPPORTING DOCUMENTATION

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

a. Proof of Business Location

All applicants must provide proof of business occupancy 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 the business name and address. Proof provided will be subject to verification.

b. Employee Roster

You must provide a current payroll record or list of employees and their hours worked (maximum 40 per week per employee).

READ AND SIGN ON REVERSE



The Portland Bureau of Transportation fully complies with Title VI of the Civil Rights Act of 1964, the ADA Title II, and related statutes and regulations in all programs and activities. For accommodations, complaints and information, call (503) 823-5185, City TTY (503) 823-6868, or use Oregon Relay Service: 711.

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 any permits are lost or stolen, I will pay a replacement permit fee.
- I authorize the parking permit program administrator to verify any information contained herein.
- The business permit(s) assigned to employees and scratch off permits may only be used for the purposes of conducting business.
- To assign any guest permits I obtain to persons only during periods when they are actually visiting my business.
- To immediately surrender any rights to use any permit(s) if the business relocates outside of the permit area.
- All permits remain the property of the City of Portland and will be revoked if improper use is demonstrated.

Signature _____
Date

6. PAYMENT

Make check or money order payable to City of Portland.

To pay by credit card (Visa, Master Card or American Express), write your card information in the space provided at the bottom of the page.

Mail completed application, supplemental documents and payment to:
**PBOT Parking Permits, 1134 SW 5th Avenue, Portland, OR, 97204 *Closed to walk
ins the last Thursday of each month from 1pm - 5pm.**

Or submit via fax: 503-823-2515

Incomplete applications will be returned.

Area parking permits issued by mail only. Questions? Call 503-823-2777

CREDIT OR DEBIT CARD PAYMENT

The City of Portland accepts Visa, Master Card, Discover and American Express.

Card number: _____ - _____ - _____ - _____

Expiration date: ____/____ Name on card: _____

Card Billing Zip Code _____ Credit card charges will read "Portland Parks and Recreation"