

PBOT

PORTLAND BUREAU OF TRANSPORTATION

ZONE B RESIDENT 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 September 1 – August 31.

Permit Type	Quantity	Cost Each	Total
Annual Resident Permit (vehicle specific; non-transferable) \$75.00 each. Pro-rated to \$37.50 after March 1.			
Daily Scratch Off Permits \$15 for a book of 10		\$15.00	
		TOTAL	

REQUIRED DOCUMENTATION

Proof of Residence

- Attach a copy of a current lease or a utility bill and black-out personal information.
- The proof must be dated within the past 30 days and include a name and address.

Vehicle Registration

Attach a copy of your current, state-issued vehicle registration for each resident or motorcycle permit you wish to purchase (the vehicle registration does not need to be issued in the state of Oregon). The last name on the registration must match the last name of the applicant above.

Supplemental Form

Additional verification is required in your zone. If you are renting, your landlord must complete and sign the Zone B supplemental form.

READ AND SIGN ON REVERSE



FOR OFFICE USE ONLY

Permit Number(s): _____ Invoice Number: _____

3. 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.

4. 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, 1134 SW 5th Avenue, Portland, OR, 97204**

Walk-in address: 111 SW Columbia St., Ste. #660
Open Monday through Friday from 8am – 5pm. Closed last Thursday of the month from 1pm – 5pm.
FAX: 503-823-2515

Incomplete or illegible applications will be returned.

Questions? Call 503-823-2777



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.

ZONE B AREA PARKING PERMIT LANDLORD VERIFICATION FORM

In an effort to prevent Zone B parking permit abuse, the City of Portland, along with the Gander Ridge/Goose Hollow Parking Committee, requires every tenant to get the signature of their landlord or building manager to obtain an area parking permit.

Please read carefully below, and select one of the following options:

1. If you **own the property** and reside within Zone B boundaries, check here _____
Return this form with your completed application, supporting document(s), and payment.
2. If you **do not own the property** and reside within Zone B boundaries, please complete the following information and have your landlord or manager sign the form.

Tenant name: _____

Address: _____

Landlord/manager name: _____

Landlord/manager phone: _____

Landlord/manager verification.

By signing below, I certify that the above information is true and correct:

Landlord/manager Signature

Date

Return this form with your completed application, supporting document(s), and payment.

Applications submitted without this information will be returned. Information provided on this form will be subject to random verification, and any inaccuracies may result in permit cancellation and/or civil penalty.

If you have questions regarding this notice or completing this form, please contact Jay Rogers at 503-823-5412 or jay.rogers@portlandoregon.gov