



TEMPORARY PARKING PERMIT FOR OVERSIZED VEHICLE

APPLICATION - BUSINESS

A commercial entity doing business in the City of Santa Barbara may apply for temporary permits to park an oversized vehicle adjacent to the residential or commercial address at which they are working.

Please fill out and print the form and return it to the Downtown Parking office at 1221 Anacapa Street.

APPLICANT	BUSINESS NAME: _____ CONTACT LAST NAME: _____ CONTACT FIRST NAME: _____ PHONE: _____ EMAIL: _____
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LOCATION	SPONSOR NAME: _____ <input type="checkbox"/> RESIDENTIAL <input type="checkbox"/> COMMERCIAL SPONSOR PHONE: _____ ADDRESS: _____ <small>(Number, Street, Unit, Zip Code)</small> This is the residential or commercial address adjacent to which you will be permitted to temporarily park your oversized vehicle.
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VEHICLE	LICENSE PLATE NUMBER: _____ STATE: _____ Attach copy of commercial vehicle registration. VEHICLE TYPE: <input type="checkbox"/> RV <input type="checkbox"/> TRAILER <input type="checkbox"/> VAN <input type="checkbox"/> TRUCK <input type="checkbox"/> OTHER <input type="checkbox"/> I CERTIFY THAT I OWN OR LAWFULLY POSSESS THIS VEHICLE
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DATE	<table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 33%; border: 1px solid black; height: 30px;"></td> <td style="width: 33%; border: 1px solid black; height: 30px;"></td> <td style="width: 33%; text-align: center; vertical-align: top;"> <small>(MAX. 5 DAYS)</small> <div style="border: 1px solid black; width: 40px; height: 30px; margin: 0 auto;"></div> # OF DAYS </td> </tr> <tr> <td style="text-align: center;">REQUESTED PERMIT START DATE</td> <td style="text-align: center;">REQUESTED PERMIT END DATE</td> <td></td> </tr> </table>			<small>(MAX. 5 DAYS)</small> <div style="border: 1px solid black; width: 40px; height: 30px; margin: 0 auto;"></div> # OF DAYS	REQUESTED PERMIT START DATE	REQUESTED PERMIT END DATE	
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FEE DUE
 The first permit you request for this vehicle is free. Each subsequent permit issued costs \$5/day.

I certify under penalty of perjury that all information on this application and supporting documents is true and correct.
 Read and executed in Santa Barbara, Ca on:

Signature: _____ Date: _____

ATTACH ALL DOCUMENTS SPECIFIED IN THIS APPLICATION. INCOMPLETE APPLICATIONS WILL NOT BE PROCESSED.

PARKING STAFF ONLY BELOW LINE

DATE RECEIVED: _____ FEE COLLECTED: _____
 DATE ISSUED: _____ PERMIT NUMBER: _____