



TEMPORARY PARKING PERMIT FOR OVERSIZED VEHICLE

APPLICATION - VISITORS

Visitors to the City of Santa Barbara may apply for temporary permits to park an oversized vehicle adjacent to a residential address at which they are a guest.

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

APPLICANT	LAST NAME: _____ FIRST NAME: _____
	PHONE: _____ EMAIL: _____
	HOME ADDRESS: _____
	CITY: _____ STATE: _____ ZIP CODE: _____
	DRIVER'S LICENSE # _____

SPONSOR	LAST NAME: _____ FIRST NAME: _____
	PHONE: _____ EMAIL: _____
	RESIDENTIAL ADDRESS: _____ <small>(Number, Street, Unit, Zip Code)</small>
This is the address adjacent to which you will be permitted to temporarily park your oversized vehicle.	
<input type="checkbox"/> I CERTIFY THAT I HAVE THE CONSENT OF THE RESIDENT SPONSOR OF THE ABOVE ADDRESS TO PARK MY OVERSIZED VEHICLE ADJACENT TO THEIR HOME.	

VEHICLE	LICENSE PLATE NUMBER: _____ STATE: _____
	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

DATE				FEE DUE The first permit you request for this vehicle is free. Each subsequent permit issued costs \$5/day.
	REQUESTED PERMIT START DATE	REQUESTED PERMIT END DATE	# OF DAYS <small>(Dates are inclusive)</small>	

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: _____