

**APPLICATION FOR TRANSFER OF A PARKING PERMIT – FEE \$5.00**  
**Please Print Clearly**

LAST NAME \_\_\_\_\_ FIRST NAME \_\_\_\_\_

ADDRESS \_\_\_\_\_ CITY \_\_\_\_\_ ZIP \_\_\_\_\_

**TYPE OF PERMIT TO BE TRANSFERRED (CHECK ONE)**

ANNUAL COMMUTER \_\_\_\_\_

24 HOUR PERMIT \_\_\_\_\_

SEMI ANNUAL COMMUTER \_\_\_\_\_

BUSINESS PERMIT \_\_\_\_\_

NEW CAR \_\_\_\_\_  
                    Make of Car                      Year                      Color                      Plate No.

**BUSINESS PERMIT HOLDERS ONLY**

NAME OF EMPLOYER \_\_\_\_\_

ADDRESS OF EMPLOYER \_\_\_\_\_

A copy of the vehicle registration and insurance card for leased vehicles must be submitted with the transfer request. I hereby certify that the above information is true and correct under the penalty of law and the permit will only be used for the car referenced above.

\_\_\_\_\_  
**SIGNATURE OF APPLICANT**

**FOR OFFICE USE ONLY**

OLD PERMIT MUST BE RETURNED  
PLACE PERMIT HERE:

DATE OF ISSUE \_\_\_\_\_

FEE PAID \_\_\_\_\_

OLD PERMIT NO. \_\_\_\_\_

NEW PERMIT NO. \_\_\_\_\_

**PROOF OF RESIDENCY SHOWN**

VEHICLE REGISTRATION \_\_\_\_\_

INSURANCE CARD \_\_\_\_\_

DRIVERS LICENSE \_\_\_\_\_

