Residential and Visitor Parking Permit Application

City of Berkeley - Customer Service Finance Department
1947 Center St., Berkeley, CA 94704
PH:(510) 981-7200 • FAX:(510) 981-7210 • TDD: (510) 981-7250

☐ Annual Permit ☐ Visitor Permit

ALL APPLICANTS: DATE: _____

NAME: LAST FIRST M.I.

STREET ADDRESS APT#

BERKELEY, CA
CITY, STATE ZIP

Driver's License/ State ID Number

HM PHONE

WK PHONE

TYPE OF PERMIT APPLYING FOR:

All permits require Photo ID and proof of residence to the Berkeley address.

☐ **1-day Permit**
- *up to 20 blank per resident*

_____ ***X $2.00 = $_____***

☐ **14-day Permit**
- *3 per year per resident;*
- *license plate and dates of use required;*
- *must start within 3 weeks of issue*

_____ ***X $20.00 = $_____***

License Plate #1:_____ #2:_____

☐ **Annual Permit** - *price varies due to pro-ration*
- *vehicle registration to Berkeley address required;*
- *if the vehicle is registered to another person, add'l documentation required*

License Plate #:_____ X $___.___

License Plate #:_____ X $___.___

(if required) VIN:

TOTAL DUE: $_____ **TENDER : CA CK CR**

OFFICE USE ONLY		AREA
1P		
4P		
PP		

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