



Parking Services Division
 3900 Main Street
 Riverside, CA 92522
 (951) 826-5620

Preferential Parking Permit Application

Please Check One: Initial Application Replacement
 Supplemental Relocation

Date: _____

Applicant Name: _____ Phone Number: _____

Riverside Address: _____ E-mail Address: _____

Corner Property? Yes No If Yes, Block number & Cross Street Name: _____

Application Fee

Please Enclose the Application fee of \$33 (Resolution No. 22904). Make check payable to: City of Riverside.

List License Plate Numbers of Vehicles Registered at This Address:

ALL VEHICLES LISTED MUST BE CURRENTLY REGISTERED AT APPLICANT'S ADDRESS (CVC 4159).

License Plate	Registration Expiration Date	Permit Number	Permit Color	Issue Date	Revoke Date

Preferential Parking Zone (PPZ) Permit Acknowledgement

1. Resident Permits are issued to a specific vehicle and are non-transferable between vehicles. Resident permits are issued to residents who have provided proof of residency including a current State of California vehicle registration showing residency within a Preferential Parking Zone (PPZ) within the City of Riverside.
2. Guest Permits shall be used solely for visiting the resident to which the permit is registered and only for the duration of the visit.
3. In order for the permit to be considered valid, the permit must be displayed in the vehicle as per the instructions included on the permit.
4. Use of a permit signifies the parked vehicle is not subject to the posted Preferential Parking Zone or PPZ restriction. All other regulations continue to apply. For example the Municipal Code prohibits storage of vehicles on the street for more than 72 consecutive hours, or parking during street sweeping hours.
5. The permit does not provide a reservation of any parking space.

I declare that I understand and agree to the statement above and that the information provided on this application is true and correct under penalty of perjury under the laws of the State of California.

Signature: _____ Date: _____

For Office Use ONLY

Date Processed _____

Amount _____

CA CC CK# _____

Initials _____

Issued via: Mail In-Person