

CITY OF EL CERRITO PARKING PERMIT APPLICATION
10890 San Pablo Avenue, El Cerrito, CA 94530

Please send a copy of your current car registration that reflects the applicable El Cerrito address. If your address is different than the one reflected on your registration please submit a copy of a utility bill to support your qualification for issuance of a permit. Please send the completed application, registration copy and utility bill copy (if applicable) and check payable to the "City of El Cerrito". Your new permit will be sent to you in the mail. See www.el-cerrito.org/parkingpermit for more information on parking permits.

(See Bottom of Back Sheet for Amounts)

Vehicle #1

Resident Information

Registered Owner: _____

Street Address: _____

Work Phone# (_____) _____ Home Phone# (_____) _____

Vehicle Description

(Year) _____ (Make) _____ (Model) _____

License Plate#: _____ Vehicle ID Number (VIN): _____

"I hereby certify that I live at the above address in the City of El Cerrito and the vehicle for which this permit is requested is housed at this same address."

Signature _____ Date _____

Vehicle #2

Resident Information

Registered Owner: _____

Street Address: _____

Work Phone# (_____) _____ Home Phone# (_____) _____

Vehicle Description

(Year) _____ (Make) _____ (Model) _____

License Plate#: _____ Vehicle ID Number (VIN): _____

"I hereby certify that I live at the above address in the City of El Cerrito and the vehicle for which this permit is requested is housed at this same address."

Signature _____ Date _____

Maximum Vehicles per Residence is Four. (See Back For Additional Space)

Vehicle #3

Resident Information

Registered Owner: _____

Street Address: _____

Work Phone# (_____) _____ Home Phone# (_____) _____

Vehicle Description

(Year) _____ (Make) _____ (Model) _____

License Plate#: _____ Vehicle ID Number (VIN): _____

"I hereby certify that I live at the above address in the City of El Cerrito and the vehicle for which this permit is requested is housed at this same address."

Signature _____ Date _____

Vehicle #4

Resident Information

Registered Owner: _____

Street Address: _____

Work Phone# (_____) _____ Home Phone# (_____) _____

Vehicle Description

(Year) _____ (Make) _____ (Model) _____

License Plate#: _____ Vehicle ID Number (VIN): _____

"I hereby certify that I live at the above address in the City of El Cerrito and the vehicle for which this permit is requested is housed at this same address."

Signature _____ Date _____

*****OFFICE USE ONLY*****

Permit Vehicle #1 Number: _____ Permit Vehicle #2 Number: _____

Permit Vehicle #3 Number: _____ Permit Vehicle #4 Number: _____

Receipt # _____ Date _____ Verified By _____

West El Cerrito: _____
09/30/2009 – 09/30/2012
Prorated \$13.50 3 yrs.
Per Vehicle
(Orange Permit)

Del Norte _____
09/30/2009 – 09/30/2011
Prorated \$9.00 2 yrs.
Per Vehicle
(Blue Permit)

El Cerrito Plaza: _____
09/30/2009 – 09/30/2010
Prorate \$4.50 1 yr.
Per Vehicle
(Red Permit)