CITY OF EUREKA
ENGINEERING DEPARTMENT
531 'K' Street, Eureka, CA 95501
(707) 441-4194
Fax: (707) 441-4202

RESIDENTIAL PARKING PERMIT APPLICATION

DATE: _____/_____/_____ FEE: _____$ 50.00_____

NAME: _____
LAST FIRST INITIAL

ADDRESS: _____
STREET # STREET NAME APT. # ZIP CODE

BLDG LOCATION: _____
(i.e., North side 3rd, near D ST, and NAME or ADDRESS of BUSINESS in same building)

ASSESSOR'S PARCEL NUMBER (APN): _____–_____–_____ (leave blank if unknown)

HOME PHONE: _____ WORK PHONE: _____

LICENSE PLATE: _____ VEHICLE YEAR: _____ VEHICLE MAKE:_____

"I HEREBY CERTIFY THAT I LIVE AT THE ABOVE ADDRESS IN THE CITY OF EUREKA AND THE VEHICLE FOR WHICH THIS PERMIT IS REQUESTED IS REGISTERED TO THIS SAME ADDRESS."

SIGNATURE _____ DATE: _____

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

☐ Driver's License ☐ Proof of Residence ☐ Vehicle Registration

Permit #: _____ Another permit at same address? Y N

Receipt #: _____ Date: _____

Parking Lot:

☐ 3rd & D	☐ 3rd & I	☐ 8th & G	☐ 2nd & H	☐ 4th & G
☐ 3rd & G	☐ 5th & D	☐ 1st & D	☐ 3rd & E	
☐ 3rd btw G & H	☐ 5th& H	☐ 1st & E	☐ 3rd btw E & F	