ANCHORAGE
PARKING
700 WEST 6th AVENUE, SUITE 206
ANCHORAGE, ALASKA 99501
(907) 276-7275
FAX (907) 279-5073

RESIDENTIAL PARKING AGREEMENT

As a residential parker, I agree to park in the area designated as:

Check One		
	South Addition	_____
	Fairview	_____
	Bootlegger's Cove	_____
	College Village	_____

I understand that my vehicle(s) must show in DMV as currently registered to my address in the residential area for the permit(s) to be issued.

I am providing **an additional** proof of residency in this area (a copy of my rental/lease agreement, mortgage, or utility bill).

I agree to display such identification stickers/permits in the rear window passenger side or in the front window passenger side for trucks as requested by Anchorage Parking.

I agree to have only one permit per vehicle. I am aware stickers/permits are nontransferable.

I agree to Anchorage Parking $5.00 for loss or damage to a permit.

I will pay Anchorage Parking the sum of $_____ for the period from _____ to _____. (Fees are $10.00 per year. The year is designated as September 1 through August 31. Fees may be prorated with a minimum of $5.00.)

I understand there will be no refunds to customers parking under this program.

I understand that Anchorage Parking shall not be responsible for damage to or losses from my vehicle or its contents.

I understand that all vehicles parked in this area may be cited by the Anchorage Police Department for violations of municipal codes and state laws.

I certify that answers given herein are true and complete to the best of my knowledge. I declare that the residential parking permit will be used only on the vehicle for which it was originally issued and that said vehicle is in my lawful possession.

I understand that giving false or misleading information in this agreement or that allowing another person to use my residential parking permit on another vehicle may result in issuance of a violation of AMC 9.65.080 (B) and (C) which shall be subject to a civil penalty of $150.00 and ineligibility for a residential parking permit for a period of two (2) years.

_____ _____
Signature Printed Name

VEHICLE INFORMATION

Issue Date	Permit Number	License #	Make	Model
Issue Date	Permit Number	License #	Make	Model

Customer Service Representative Signature _____

Revised 07/22/04