

COMPANY VEHICLE VERIFICATION FORM



OFFICE: New City Hall, Revenue Division 915 I St., Rm 1214 Sacramento, CA 95814 ▪ PHONE: 916.264.5011 ▪ FAX: 916.808.1935

Form Instructions:

- Complete fields below
- Sign and keep a copy for your own records
- Attach a copy of the vehicle registration
- Attach current Proof of Residency

Submit documents either in-person, by fax or by mail

COMPANY INFORMATION

Company:

Address:

Owner / Manager:

First and Last Name

Phone Number

**Company Vehicle
License Plate #:**

RESIDENT (APPLICANT) INFORMATION

Vehicle Assigned To (Resident Name):

First and Last Name

Address of Residence Where Vehicle Will Park:

Dwelling Number and Street Name

Apt, Unit or Floor #

Zip Code

Completion and submission of this form constitutes acknowledgment and agreement to the Sacramento City Code Chapter 10.48 – Residential Permit Parking Program, including all penalty provisions underlined in S.C.C. 10.48.150. All Sacramento City Codes may be read in their entirety at <http://www.cityofsacramento.org>

We, the undersigned, as representatives of the company reflected on this form and/or as the resident applying for a Residential Parking Permit, do hereby declare with our signatures below that all information reflected on this form and the attached vehicle registration are true and submitted without intent to violate Sacramento City Code 10.48

COMPANY REPRESENTATIVE

DATE

RESIDENT (APPLICANT)

DATE