

CITY OF ASTORIA 1095 DUANE ST ASTORIA, OR 97103 (503) 325-5821

## **PARKING PERMIT**

Date:		-				
APPLICANT N	VAME:					
BUSINESS N	AME:		······			
ADDRESS:						
TELEPHONE NUMBER:				# OF VEHICLES:		
DESCRIPTIO	N OF VEHICLE(S):					
LICENSE NU	MBER OF VEHICLE(S	):				
LOCATION O	F JOB:					
BEGINNING DATE: ENDING DATE:						
	Place the permit in a vi					
For office use						
CODE: NPE		е Оссии	oational Tax	has been l	baid for the current year **	
Delore tar	ing payment, make our	<u>o ooou</u> ,			<u></u>	
Rental Fees:	\$5.00 per day \$100.00 per 3 months	\$25.00 per week \$180.00 per 6 months		onths	\$40.00 per month \$330.00 per year	
TYPE OF PER	MIT (CIRCLE ONE):	DAY	WEEK	MONT	H YEAR	
Date Paid:	Number of Vehicles Paid For:					

Receipt #:\_\_\_\_\_

Amount Paid:\_\_\_\_\_