

NOTE: This is NOT a Parking Permit

Name of the Street where vehicle to be parked _____

Name of Applicant _____

Address of Applicant _____ Unit _____ City _____ Prov. _____ Postal Code _____

Applicant Home Telephone	Area Code	Number	Applicant Business Telephone	Area Code	Number
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THIS FORM IS FOR INFORMATION PURPOSES ONLY
It does not authorize parking on a licensed street and it will not prevent you from being ticketed if you park illegally.

Are you: Owner Joint Owner Tenant Other: _____

Name of vehicle ownership: _____

Vehicle Plate Number: _____

Is there a driveway or garage at your address? Yes No

If Yes, do you have access to that parking? Yes No

Is letter attached from property management/owner advising no parking available to you? Yes No

Do you have a valid parking permit?..... Yes No Permit Number: _____

Personal information on this application is collected under the authority of the City of Toronto Act, 2006, s.136(c), By-law No. 680-2006, and the City of Toronto Municipal Code, Chapter 925, Permit Parking. It will be used for administrative purposes in connection with your application and enforcement purposes of Municipal Code Chapter 925.

Your name, the address of the proposed parking and number of vehicles to be parked will be treated as public information and may be included in reports to the Community Council.

Any questions about the collection or use of this information can be addressed to the Supervisor of Permit Parking.

Applicant's Signature: _____

Date: _____