RESIDENT'S SPECIAL EVENT ONE-DAY PERMIT APPLICATION

- Applicant must be a resident of the Live Oak Parking Program Permit Zone.
 Resident Application must be on file prior to submittal of Special Event Application.

address	•	valid when vehion this application.	•	ed in front	of or in neares	t available	space to the
Voided or Expired permits are invalid and subject to citation if used.							
APPLICANT INFORMATION PLEASE PRINT WHEN COMPLETEING INFORMATION BELOW							
LIVE OAK PARKING ZONE ADDRESS					SANTA CRUZ	CA	95062
APPLICANT NAME	NUMBER	STREET		APT#	CITY	STATE	ZIP
PHONE	LAST			FIRST			
MAILING ADDRESS If different than zone address	HOME			OTHER			
EMAIL				DATE OF SPE	ECIAL EVENT:	DAY OF THE W	EEK:
	NUMBER OF ONE-DAY PERMITS AT \$5.00 EACH = \$						
				AMOUNT	ENCLOSED =	•	5
	I am the owner and/or the principal resident of the above address. Violations are subject to fine under County Code 9.44.200B. One day permits are only valid for the date listed on the permit. I CERTIFY UNDER PENALTY OF PERJURY THAT THE ABOVE INFORMATION IS TRUE.						
SIGNATURE						DATE	
APPLICATION MUST BE RECEIVED TWO WEEKS BEFORE YOUR EVENT OR BROUGHT TO OUR OFFICE IN PERSON. PLEASE CHECK HERE IF YOU PREFER TO PICK UP YOUR SPECIAL EVENT PERMITS AT THE TRAILER.				MAKE CHECKS PAYABLE TO: COUNTY OF SANTA CRUZ MAIL APPLICATION AND PAYMENT TO: COUNTY OF SANTA CRUZ ATTN: LIVE OAK PARKING PROGRAM 701 OCEAN STREET, ROOM 410 SANTA CRUZ, CA 95060			
PERMIT NUMBERS		то	_ R	ECEIPT NUME	BER		AMOUNT _\$
ISSUED BY		DATE		TIME		ADC	ODE