



Approved D

Application for Reserved Parking Permit

Application D	ate:		
Name of Pers	son Filing Application:		
Affiliation:	Name of applicant's sponsor	ring department, agency, board, Comm	ission or organization (as applicable)
Address:	Full mailing address		
Phone:	Include Area Code	E-mail:	Optional
Purpose:	Nature of official business or s	ervice(s) performed for which a reserve	ed parking permit is being sought
Location of R	eserved Space:	dentify specific location (if applicable).	Not necessary for media applicants.
Number of Pa	arking Spaces:	Not necessar	y for media applicants.
Day(s), Time	(s) and Duration of Use	e:	y for media applicants.
Parking Avail	ability in Area:	Not necessary for media applicant	s to use existing reserved spaces.
Describe how (Not necessary for	traffic movement may those applying to use existing	/ be affected: reserved parking spaces.)	
Vehicle for will Model Year: Make: Model: Color: License Plate	::	Being Requested (Permits	s are non-transferrable.)

Reserved parking permits expire April 30 every year. Reserved parking permits must be displayed in the lower left corner of the authorized vehicle's rear windshield.

Send completed permit applications to:

Public Works Department – Traffic Management Division 420 W Main Street, Suite 600 Oklahoma City, OK 73102