



CITY OF
FAYETTEVILLE
ARKANSAS

Residential Parking Enrollment Form

Date:
Applicant Name:
Address in District: Fayetteville, AR 72701
Mailing Address:
Email Address:
Home Phone: Cell Phone:

Zone (Choose One): ___ North Zone (North of Dickson St.) ___ South Zone (South of Dickson St.)

Resident Info (Choose One): ___ Home owner living in District ___ Renter
___ Home owner living outside of District

Guest Passes (Optional): ___ 2 Hang Tags (Unlimited Use)

Proof of Residency* (Must provide one of the following): ___ Current vehicle registration
___ Property tax bill
___ Residential lease agreement

* Homeowners must renew annually; renters of properties within the district must renew semi-annually.

Vehicle Information*: License Plate No. State
Make Model
Year Color

* Must provide current vehicle registration of vehicle that the permit is being issued to.
* Resident Parking Permit issued is for this vehicle ONLY and is not transferrable to another vehicle or another individual.

Mail Permit To: Address In District (above) Mailing Address (above) Pick up at Parking Office

I hereby agree to the following: My City of Fayetteville parking permit is for my individual use and may NOT be transferred to another individual. Any vehicle with unpaid parking citations on permitted vehicle is subject to suspension of parking permit until all citations are paid. Payment of parking citations may be made by cash, check, or credit card.

All resident permits, hang tags and guest passes can only be used for residents and their visitors, may not be sold or transferred and have no monetary value. (See Penalty for Misuse)

Signature Date

Please return completed forms and required documentation to the Parking Management Office, 416 W Spring Street. Information can be faxed to 479.575.8250 or scanned and e-mailed to parking@fayetteville-ar.gov.