

Residential Parking Permit Program

PETITION OF SUPPORT

For P&D Office Use	
Date Recv'd: _____	Request No.: _____

We, the undersigned residents and occupants, have received the attached map indicating the proposed residential parking permit area and have indicated if we **Support or Do Not Support**. Some residents report a severe lack of adequate parking curbside for themselves or visitors due to non-resident parking. They request the City of Houston designate a Residential Parking Permit Area as mapped. The residents in favor of the designation are requesting a residential parking permit area that restricts parking along the _____ block of _____ (street), on _____ side(s) of the street, to residents and their visitors only by annual permit valid from date of issue. The City will conduct a survey of on-street parking conditions along the block as needed. If approved by City Council, occupants of each address in the block will receive written notice of permit area boundaries, parking restrictions, and fees and procedures for obtaining on-street parking permits.

Resident Name (Print)	Home Address (Street # and Name)		✓ for Fact Sheet Received	Support	Do not Support	Vehicle License Plate Number (s)	Signature	Date
1)	_____		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____	_____
2)	_____		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____	_____
3)	_____		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____	_____
4)	_____		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____	_____
5)	_____		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____	_____
6)	_____		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____	_____
7)	_____		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____	_____
8)	_____		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____	_____
9)	_____		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____	_____
10)	_____		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____	_____
11)	_____		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____	_____
12)	_____		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____	_____
13)	_____		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____	_____
14)	_____		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____	_____
15)	_____		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____	_____

I, as the contact person, agree by signing (right) that I acknowledge the signatures gathered on this petition are genuine and accurate, and that each household has received a fact sheet.

Signature _____ Date _____