



# PARKING DIVISION LOADING ZONE APPLICATION

## BILLING INFORMATION

CONTACT: \_\_\_\_\_ PHONE NUMBER: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

REQUESTED ZONE LOCATION(S): \_\_\_\_\_

EMAIL ADDRESS: \_\_\_\_\_

SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_

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**OFFICE USE ONLY:**

## ZONE INFORMATION

APPROVED ZONE LOCATION(S): \_\_\_\_\_

BUSINESS OR BUILDING: \_\_\_\_\_

METER NUMBER(S): \_\_\_\_\_ DATE INSTALLED: \_\_\_\_\_

LENGTH: \_\_\_\_\_ RATE: \_\_\_\_\_ TOTAL: \_\_\_\_\_

**ZONE TYPE:**

FLZ	PLZ	TLZ	10 MIN PARK	30 MIN PARK	HANDICAP	TAXI STAND	OTHER

**SIGN TYPE:**

RT	LT	DBLE	7AM-6P	8AM-5P	8A-4:30p	9AM-6P	ESSH	OTHER

**SIGN SIZE:**

6 X 10	6 X 12	6 X 18	12 X 18	18 X 24	OTHER

**SIGN MOUNT:**

METER POLE	ST. LT. POLE	DOCK	BLDG	10' RD. POLE	UNI-STRUT	U-POST

\_\_\_\_\_  
CHECKED BY

\_\_\_\_\_  
DATE

\_\_\_\_\_  
PAID