



PARKING AUTHORITY CITY OF POTTSVILLE, PENNSYLVANIA

City Hall, 401 N. Centre St. – 1st Floor, Pottsville, PA 17901
(570) 628-9184

(Authority employee will fill in this part ⇔)

Residential Parking Permit #: _____

Residential Parking Area: _____

July 1st, 2026 – June 30th, 2027 RESIDENTIAL PARKING PERMIT APPLICATION, \$50.00

APPLICANT CONTACT INFORMATION:

NAME: _____ DRIVER'S LICENSE #: _____

ADDRESS: _____ APT #: _____

CITY: _____ STATE: _____ ZIP CODE: _____

HOME / CELL PHONE NUMBER: _____

EMAIL ADDRESS: _____

PRIMARY VEHICLE INFORMATION:

LICENSE PLATE NUMBER: _____ STATE OF ISSUE: _____

MAKE: _____ MODEL: _____ COLOR: _____ YEAR: _____

SECOND VEHICLE INFORMATION:

LICENSE PLATE NUMBER: _____ STATE OF ISSUE: _____

MAKE: _____ MODEL: _____ COLOR: _____ YEAR: _____

Proof of Residency:

Please check one: (please attach legible photocopy of one of the following documents)

- Current lease with your name and address on the document
- Current utility bill with your name and address on the document
- Notarized letter from the landlord with name and address on the document

I declare that the information on this Residential Parking Permit Application is true and correct. I have read and understand the Residential Parking Permit Guidelines. I understand the vehicle on which the permit is displayed must be registered with the Pottsville Parking Authority. I acknowledge that failure to properly display this permit may result in the issuance of a citation, and that it is my responsibility to inform all members of my household and visitors on the correct use of my permit.

One vehicle on street permit per residence ONLY, unless authorized prior to the 2022/2023 permit year. A scan of the front of your driver's license is also required.

Signature: _____ Date: _____