



We Are Columbia

Together we will build a world-class city

City of Columbia
PARKING SERVICES DEPARTMENT
820 WASHINGTON ST. COLUMBIA SC 29201 - PHONE: 803-545-4015
TENANT APPLICATION FOR RESIDENTIAL PARKING PERMIT

Select Application Type: Circle One NEW or RENEWAL					
First Name (Please Print):		Last Name (Please Print):		Phone#:	
Address:			Apartment #:		
Number of Persons at Address:		Email Address:			
Vehicle Tag #:		Vehicle State:		# Off Street Spaces Available: N/A	
I hereby certify that the information listed above is true and correct. I have received a printed copy of the regulations regarding this permit. I understand the permit issued is valid for six months, running on a schedule of January-June/July-December. I further understand that any errors in this information will result in the cancellation of any and all permits issued. I further understand that to qualify for a permit, I will pay or cause to be paid any and all past due parking tickets issued to my vehicle by the City Of Columbia.					
Applicant Signature:				Date:	
<i>DO NOT WRITE BELOW THIS LINE – OFFICE USE ONLY</i>					
Issued By:					
Tenant Permit #: T-		Visitor Permit#1 TV-	Visitor Permit#2 TV-	Expiration Date:	
Receipt #:		Amount Paid:			
Comments:					
Revised 8/23/23					

RESET

SUBMIT