



City of Austin

Austin Transportation Department, Right of Way Management Division
P.O. Box 1088, Austin, TX 78767

NOTIFICATION OF PROPOSED PARKING PERMIT AND SIGN OFF REQUEST

The City of Austin requires in some instances, that property owners/residents whose property is adjacent to the impacted parking area be notified. The notification must indicate, by signature, whether the property owner/resident approves or disapproves of the proposed parking closure. For additional information on City of Austin Parking Space Permit requirements please call 512-974-7828.

For additional information concerning the use of the parking space(s) at this location please contact:

_____ (Contact Name)

_____ (Phone Number)

_____ is applying for a PARKING SPACE permit for the following activity:
(Contact Name)

_____ (Description of Activity)

The activity is scheduled for the following dates and times: _____

The activity will close off parking spaces on the following street(s): _____

Property Owner/Resident Please fill out this section completely as this information is used by the City of Austin to determine whether or not the parking activities indicated above will be approved or denied.

APPROVE **DISAPPROVE**

_____ (Print Name and Title if applicable)

_____ (Signature)

_____ (Address OR Street and Block Number)

_____ (Phone Number)

Residence **Business**
(Check One)

_____ (Name of Business if applicable)

Comments: _____
