

******INVALID IF NOT FILLED OUT COMPLETELY AND ACCURATELY******

(Please type or print, incomplete or illegible forms will not be accepted.)

Notification of Temporary No Parking Zone

Fax Number 206-684-5101

Faxes received before signs are actually verified are invalid and will not be accepted.

SDOT PERMIT NUMBER(S): _____

REASON FOR TEMPORARY NO PARKING ZONE:

STREET ADDRESS including block number (only one block per sheet):

NUMBER OF SIGNS _____ on N S E W SIDE OF STREET (circle one)

NUMBER OF SIGNS _____ on N S E W SIDE OF STREET (circle one)

START DATE: ____/____/____ END DATE: ____/____/____ (must have end date)
(NOT VALID AFTER 30 DAYS)

START TIME: _____AM/PM END TIME: _____AM/PM or 24HRS

RESPONSIBLE COMPANY OR AGENCY PROVIDING SELF-VERIFICATION:

COMPLETE MAILING ADDRESS: _____

PHONE NUMBER: _____

FAX NUMBER: _____

RESPONSIBLE PARTY'S NAME AND PHONE NUMBER:

_____, CERTIFY UNDER PENALTY OF PERJURY UNDER THE LAWS OF THE
(PRINT NAME)

STATE OF WASHINGTON THAT ON _____ AT _____AM/PM, I VERIFIED
(DATE) (TIME)

THAT THE TEMPORARY NO PARKING SIGNS WERE PROPERLY INSTALLED ACCURATELY,
NOTIFIED THE PUBLIC OF THE TEMPORARY NO PARKING ZONE, AND PROVIDED A MINIMUM OF 24
HOURS NOTICE OF THE TEMPORARY NO PARKING ZONE.

(SIGNATURE)

(DATE AND PLACE)

Signs must be verified 24-48 hours before any enforcement action can be taken. Verifications FAXED more than 72 hours prior to the start of the restriction date are invalid and will not be accepted.

FOR QUESTIONS PLEASE CALL SPD PARKING ENFORCEMENT: 206-386-9012

Rev. May 23, 2008