



Reserved Parking Permit Pilot Program

The City has fifteen (15) reserved parking spaces Parking Lot P4 and thirty (30) reserved parking stalls in Parking Lot P2. A reserved parking permit allows the vehicle to be parked in the specific reserved parking location within the parking area, Monday through Friday 7:00 AM through 7:00 PM. For the reserved parking permit, a sign is placed in the parking space limiting the use of the space M-F for the permit holder's vehicle. The City will not tow an unauthorized vehicle from the space, except under extreme circumstances. If an unauthorized vehicle is parked in a licensed space, then contact the City at 509-548-5275 to report the issue, including your contact information, the space location, and vehicle information.

The City Administrator may authorize a permit for a parking space depending on availability. Payment shall be for six (6) months in advance. Signs for the reserved space will be provided by and installed by the City. Payment and issuance of permits will be through the City's parking permit front office staff. Any applicable taxes are borne by the applicant. No refunds. The City reserves the right to remove the licensed space with 48 hour notice and refund the prorated amount.

The requested application information below should be completed and sent to the City of Leavenworth at P.O. Box 287 / 700 Highway 2, Leavenworth, WA 98826 or emailed to permits@cityofleavenworth.com. Once approved, please make checks payable to the City of Leavenworth and pick up your permit. Thank You! Permit must be displayed on driver's side of dash, viewable for verification. Permits are issued to the individual and maybe transferred to another vehicle. Permit must be present and visible on the driver's side of the front window.

Select a Location	Reserved Monthly Fee	Reserved Six (6) Month Fee	# Permits
<input type="checkbox"/> Lower Lot (P2) (Parking not available for the month of October.)	\$30.00	\$180.00	
<input type="checkbox"/> Adjacent to City Hall (P4)	\$45.00	\$270	

Contact Name/Business _____

Address _____

Phone: _____ Email: _____

Lot location requested: _____ Requested Start Date: _____

Vehicle Make/Model/License Plate: _____

Vehicle Make/Model/License Plate: _____

Requestor signature: _____ Date: _____

Signature acknowledges six (6) month payment obligation

Official Start/End Date: _____

Approved: _____, Date _____

Permit # _____