

**CITY OF REDONDO BEACH  
PARKING METER PERMIT APPLICATION**

DATE: \_\_\_\_\_

PERMIT # \_\_\_\_\_

**\$110.00**

**PERMITS WILL BE ISSUED TO  
CURRENTLY REGISTERED CALIFORNIA VEHICLES ONLY**

**Please Print**

NAME: \_\_\_\_\_

CAR LICENSE NO. \_\_\_\_\_

ADDRESS: \_\_\_\_\_

CITY: \_\_\_\_\_ ZIP CODE: \_\_\_\_\_

HOME PHONE: (\_\_\_\_) \_\_\_\_\_

BUSINESS PHONE :(\_\_\_\_) \_\_\_\_\_

**I have received a copy of the Parking Meter Permit rules and I agree to follow the rules governing the use of the City of Redondo Beach Permit Program.**

ISSUED BY: \_\_\_\_\_

\_\_\_\_\_  
SIGNATURE OF APPLICANT

**Please indicate if you would like to receive an email or postcard for next year's parking meter permit notification POSTCARD: \_\_\_\_\_ EMAIL ADDRESS: \_\_\_\_\_**

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