

Savannah Code, (Section 7-1062) Residential Decal Application and Affidavit

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| Section One – Except for signature(s), this form must be type, electronically completed and printed or legibly hand printed | | | | | | | |
|--|----------------------|--------------------------|------------------------------|--|------------------|------------|--|
| Completed by MPSD: | Residential: | 2 nd Resident | 2 nd Residential: | | by-Month: | Temporary: | |
| Staff Initials: | | | # | | | # | |
| Completed by Customer: | | | | | | | |
| Applicant Full Legal Name: | | | | Driver's License # | | | |
| Vehicle Owner's Full Legal Name: | | | | County of Residence: | | | |
| Address: | | | | Relationship to Vehicle Owner – Check only one box □ Child □ Spouse □ Ward | | | |
| Phone Number: E-Mail Addre | | | ss: | | | | |
| Section Two | | | | | | | |
| Vehicle Make: | | Vehicle Make: | | | Vehicle Make: | | |
| Year of Vehicle: | | Year of Vehicle: | | | Year of Vehicle: | | |
| Tag# and State: | | Tag# and State: | | | Tag# and State: | | |
| Expiration: | | Expiration: | | | Expiration | | |
| Proof of Residence: Lease: | | | Warı | rranty Deed Property Tax | | | |
| Expiration of Lease: | | | Туре | Type of Utility: | | | |
| Landlord Name: | | | Phon | Phone: | | | |
| Landlord Signature: | | | Date | Date: | | | |
| By voluntarily printing and signing my name below, I the affiant and applicant for a parking permit decal for one of the following purposes (check one): □ Residential, □2 nd Residential, □Month-by-Month, □Temporary Through the City of Savannah Mobility and Parking Services Department, do hereby declare and acknowledge my understanding that any falsification or misrepresentation in any aspect of my application will be considered grounds for denial and/or permanent revocation of the parking permit decal. Furthermore, such falsification or misrepresentation will also be cause for the immediate arrest and prosecution under O.C.G.A. §16-8-2 (relating to theft by taking), § 16-8-3 (relating to theft by deception), § 16-8-4 (relating to theft by conversion), and/or § 16-8-5 (relating to theft of services), if a person knowingly: (1) Uses false identification; (2) Provides false information on a written contract; (3) Makes, draws, utters, executes, or delivers an instrument for the payment of money on any bank or other depository in exchange for present consideration, knowing that it would not be honored by the drawee (City of Savannah); | | | | | | | |
| Applicant Name: | | | Appl | Applicant Signature: [L.S.] | | | |
| MPSD Representative: | | | Date: | | | | |
| Note: Notarization Required For Application Completion and Acceptance | | | | | | | |
| Sworn to and subscribed before me | | | | Notary Public's Signature & Notary Seal or Stamp | | | |
| Thisday of | (Day) (Month) (Year) | | | | | IT O I | |
| | | | | [L.S.] | | | |
| (Date My Notary Commission Expires) | | | | | | | |