

Parking Permit Change Form

Change of Name or Address

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|-----------------------------------|
| Name: |
| Permit #: |
| Address will change as of (date): |

| Former Address: | New Address: |
|-----------------|---------------|
| Street: | Street: |
| City & State: | City & State: |
| ZIP code: | ZIP code: |
| Former Name: | New Name: |
| | |

Changes in name or address will be updated by the City of Saginaw within 72 hours of receiving the request.

Lot Change Request

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|---|-----------------------|
| Name: | |
| Permit #: | |
| I would like to request a transfer to the following Lot/Ramp: | |
| Current Lot: | Requested Lot: |

Lot/Ramp changes will be granted on a first come first serve basis and only prior to the quarter start. Lot/Ramp change requests will need to be made by the 15th of the month prior to the quarter start to be considered for the upcoming quarter.