

DRIVING A COMPANY VEHICLE THAT IS REGISTERED OUT-OF-STATE

Permit Applicant Information:

Last Name _____ First Name _____ Middle Initial _____

Address _____ Unit No _____

City/State/Zip _____

Phone Number _____ Drivers License Number _____

Applicant Signature _____ Date _____

I understand that by solely submitting this manual application I will not receive a replacement permit when it expires. Automatic renewal requires that I register online, connect to my account and request automatic renewals unless I have already done so.

Vehicle Owner/Leasee Information:

Company Name _____

Address _____

City/State/Zip _____

Vehicle Information:

VIN _____ Plate No _____ State _____

Make _____ Model _____ Year _____

Fairfax County Personal Property Tax No. for vehicle _____
(excludes government issued vehicle)

_____ has possession of our company vehicle and has permission to obtain and use a Residential Parking Permit at their residential address above in Fairfax County, VA.

I affirm that we are the legally registered owner or lessee of the vehicle listed above and that all information provided is correct and accurate to the best of my knowledge. I hereby grant authorization to the Department of Tax Administration to release registration information for this vehicle to the Department of Transportation for verification purposes.

Sign _____ Date _____