



Zone 2 Residential Permit Parking Program

Application for FlexPass

Please complete this form to receive a long term temporary permit, or FlexPass, for the City of Falls Church Zone 2 Permit Parking Program. A FlexPass is valid for 60 days from date of issuance. Please mail or deliver your application to the Office of the Treasurer, Harry Wells Bldg., 300 Park Ave, 201W, Falls Church, VA 22046. You may also *fax* the completed application to 703-248-5048, or email to Treasurer@fallschurchva.gov. For additional information, please call the Treasurer's Office at 703-248-5046 weekdays from 8:00 – 5:00.

Name of Household Contact (Please print) First _____ Last _____	Daytime Phone _____	Email Address _____		
Street Address _____	Zip Code _____	Zone 2	New Request <input type="checkbox"/>	Date _____
			Replacement <input type="checkbox"/>	

HOUSEHOLD REQUEST FOR FLEXPASS

- A "FlexPass" parking permit may be issued for longer term temporary parking permit requests such as for overnight in-home caregivers or long term visitors.
- Once issued, a FlexPass is valid for a period of 60 days.
- The City Code requires all vehicles garaged in the city to be registered with the Commissioner of Revenue within 60 days; however this requirement may be waived and your FlexPass extended for an additional period of time based on individual circumstances. Please contact the Treasurer's Office for more information
- Please use the space below to state the reason for your request.

Vehicle 1	Year, Make & Model _____	Tag State/Number _____	Title Number or VIN Number _____
	Owner's Name (First, MI, Last) _____ <input type="checkbox"/>	Leased Vehicle Check Here _____	Owner's Signature _____

<p>The City of Falls Church Treasurer issues permits to specific vehicles. I agree that I will attach each permit <i>only</i> to the vehicle for which it was issued. I understand that misuse of a permit may result in being denied participation in the Permit Program. I understand that all vehicles must be registered with the Commissioner of the Revenue of the City of Falls Church and all Personal Property taxes and any other fees must be paid by participant before any permits are issued. I understand that failure to comply with the rules of the program may result in revocation of the parking permit. I have read this application entirely and agree to all terms and conditions.</p> <p style="text-align: right;"><i>Signature</i> _____</p>	No. of Permits _____
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For CFC Use	Action:	Reason for Denial:	Permit #:
	_____ Approved		# Temps Issued:
	_____ Denied		Date: