



# CITY OF TOPEKA

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Facility Management Division  
620 SE Madison, Unit 10  
Topeka, KS 66607-1118  
www.topeka.org



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## APPLICATION FOR ANNUAL DELIVERY VEHICLE PARKING PERMIT

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

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

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

APPLICANT PHONE NUMBER: \_\_\_\_\_

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

CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_

TYPE OF DELIVERIES: \_\_\_\_\_

\_\_\_\_\_

NORMAL DELIVERY HOURS: \_\_\_\_\_

VEHICLE DESCRIPTION: \_\_\_\_\_

VEHICLE LICENSE NUMBER: \_\_\_\_\_

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### FOR OFFICE USE ONLY

APPROVED: \_\_\_\_\_ DENIED: \_\_\_\_\_

REASON FOR DENIAL: \_\_\_\_\_

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### FEES

ANNUAL PERMIT FEE: \_\_\_\_\_

ANY UNPAID PARKING FEES: \_\_\_\_\_

TOTAL AMOUNT DUE: \_\_\_\_\_