



# City of La Habra

POLICE DEPARTMENT

"A Caring Community"

## APPLICATION FOR 2026 OVERNIGHT PARKING PERMIT

**Permits shall be considered on a basis of need and not issued solely for convenience.**

**Fee Schedule:** Fees are for the calendar year & will not be prorated. The fee for the first vehicle is **\$43.00**. Additional permits issued will be **\$23.00** per vehicle. Replacement fee of a lost or stolen permit is **\$9.00**.

**Restrictions:** Parking permits are not issued to motor-homes, motorcycles, boats, trailers, trucks with campers larger than a shell, or commercial vehicles weighing over 7,500 pounds. No vehicle, including those with parking permits, will be allowed to remain standing (parked) on any street for more than 72 consecutive hours (22651(k) CVC). Vehicles must be registered at the same address as applicant & the driver must have a valid driver's license with the same address (one permit per licensed driver allowed). One application per address allowed. Permits are valid from the date of issue through 12/31/2026.

### ALL COMMUNICATION WILL BE CONDUCTED THROUGH EMAIL

**PLEASE PRINT NEATLY AND LEGIBLY**

**NAME:** \_\_\_\_\_ **EMAIL:** \_\_\_\_\_

**ADDRESS:** \_\_\_\_\_ **UNIT#:** \_\_\_\_\_ **PHONE #:** \_\_\_\_\_

I acknowledge that: (initial each line)

I am a resident at the above address & have a VALID CA Driver's License \_\_\_\_\_

Only one 2026 application for parking permits per address allowed \_\_\_\_\_

I am utilizing my driveway & parking space(s) prior to requesting parking permits \_\_\_\_\_

I have read & understand the fee schedule and restrictions section of the application \_\_\_\_\_

I understand that if a parking permit is issued, the vehicle(s) described in this application must be parked adjacent to or in front of the property where I reside. If an off-street parking space becomes available at a later time, I must use it instead of parking on the street. I understand that the parking sticker must be applied to the left rear bumper of the vehicle, and that it is not transferable to any other vehicle. I understand that I am liable for any citation received as a result of failure to comply with any of the above conditions. Falsification of any information given herein will result in revocation of my permit(s) and a refund will not be issued.

**Reason for requesting permits (optional):** \_\_\_\_\_

**Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

• Chief Adam Foster •  
150 North Euclid Street, La Habra, CA 90631  
(562) 383-4300 Fax: (562) 383-4492  
www.lahabracaca.gov

**\*\* LIST ONLY THE VEHICLES THAT YOU ARE REQUESTING A PERMIT FOR\*\* PROVIDE A COPY OF THE CURRENT REGISTRATION\*\***

VEH #	YEAR	MAKE	MODEL	COLOR	LICENSE PLATE #	CA DRIVERS LIC#	PERMIT #	NOTES:
1								
2								
3								
4								
5								
6								
7								
8								
9								
10								

**\*\*\*FILL IN YELLOW HIGHLIGHTED PORTION ONLY\*\*\***

**\*\*\*\*\*FOR POLICE DEPARTMENT USE ONLY\*\*\*\*\***

DATE APP RECEIVED:	# OF PERMITS ISSUED:	TOTAL DUE \$	CASH	CHECK	CREDIT CARD
PSN #	NOTES:				

REQUEST FOR ADDTL PERMITS RECEIVED:	# OF PERMITS ISSUED:	TOTAL DUE \$	CASH	CHECK	CREDIT CARD
PSN #	NOTES:				

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