Montgomery County Department of Transportation

Division of Parking Management

# APPLICATION FOR CARPOOL PARKING

Click to Print

(This is not an on-line application. However, you can type in the boxes provided, print, and send the application)

**CSS USE ONLY**

CSS Valid No: _____ Validated By: _____

No. Of Persons in Pool: _____ Garage Number: _____

ALL MEMBERS OF THE CARPOOL MUST REGISTER WITH THE COMMUTER SERVICES OFFICE, AND OBTAIN A VALIDATED CARPOOL APPLICATION.

A CARPOOL MUST CONSIST OF TWO (2) OR MORE PERSONS, COMMUTING A MINIMUM OF THREE (3) DAYS PER WEEK.

THE COMPLETED, VALIDATED APPLICATION MUST BE PRESENTED IN PERSON AT THE PERMIT SALES OFFICE.

Last Name _____ First Name _____ M.I. _____

**Mailing Address:**

Street _____ Apt. /Suite # _____

City _____ State _____ Zip _____

**Home Address:**

Street _____ Apt. /Suite # _____

City _____ State _____ Zip _____

Home Phone: _____ - _____ - _____ Work Phone: _____ - _____ - _____ Ext: _____

Carpool: _____ Vanpool: _____ Work Hours: _____ to _____

CERTIFICATION:

I certify that I am the principal driver of the carpool with the individuals indicated in the application and that I commute to and from work with them on a regular basis, a minimum of (3) days a week. Should any changes occur (additions, deletions or replacements), I agree to notify the Commuter Services Office immediately. I have read and agree to abide by the Preferential Carpool Permit Program Rules with the understanding that violations on my part may result in the cancellation of the permit. I acknowledge that should any of the information relating to the carpool of which I am a member be found to be untrue, the carpool's special parking previligies will be revoked. I understand that this permit is valid only at the designated facility in specifically assigned CARPOOL areas or at any Long term (9 hours or more) meters within the designated facility.

Signature: _____ Date: _____

**Official Use Only**

Control # _____ Account # _____ Fees $ _____

MONTGOMERY COUNTY, MARYLAND
PARKING SALES AND COLLECTIONS OFFICE
809 ELLSWORTH AVENUE (within Garage 61)
SILVER SPRING, MD 20910
MAIN: 240-777-8744 FAX: 301-565-5898