



PORTLAND BUREAU OF TRANSPORTATION

1120 SW Fifth Ave, Suite 1331, Portland OR 97204

Main: 503-823-5185 TTY: 503-823-6868 Fax: 503-823-7576

Portland.gov/Transportation

## **ZONE K FORM - BUSINESS AREA PARKING PERMIT EMPLOYEE ROSTER**

### ***INSTRUCTIONS FOR UPLOADING FORM IN ONLINE SYSTEM:***

- 1. Fill out this form in the web browser.*
- 2. Click the print button.*
- 3. Choose "save as PDF".*
- 4. Save the form to your device, give it a name you can easily locate.*
- 5. Log into the online permit system. Follow the prompts.*
- 6. On step 4, you will click "choose file".*
- 7. Find the file saved to your device.*
- 8. Double click on the file to upload it to the online permit system.*
- 9. Note that when the file has been successfully uploaded, it will say "submitted"*

### **1. APPLICANT INFORMATION**

**Name:**

**Business Name:**

**Address:**

**Email:**

### **2. CALCULATE NUMBER OF PERMITS**

The number of annual business permits available to your business is calculated from the payroll information you submit below (step #4 Employee Roster on page 3). Zone K businesses may purchase up to 70% of the total FTE. To calculate your allotment:

- Total number of employee hours per week calculated from step #4 Employee Roster (maximum 40 hours per employee):
- Divide total number of hours by 40. This is your total FTE:
- Multiply total FTE by .7 and round up. This is the maximum number of permits you are eligible for.
- How many permits will you purchase?



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### 3. EMPLOYEE ROSTER - Hours per week maximum is 40 per employee

No.	Last Name	First Name	Hours work per week
1.			
2.			
3.			
4.			
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No.	Last Name	First Name	Hours work per week
44.			
45.			
46.			
47.			
48.			
49.			
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No.	Last Name	First Name	Hours work per week
88.			
89.			
90.			
91.			
92.			
93.			
94.			
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127.			
128.			
129.			
130.			

Total Number of Employee Hours:

**Please submit additional roster pages if you have more than 130 employees.**

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## 4. SIGNATURE

By applying for this permit and signing the application, the undersigned agrees to the following:

- All the information on this form (and any supplemental information I have provided) is true and correct.
- I authorize the parking permit program administrator to verify any information contained herein.
- The business permit(s) assigned to employees may only be used for the purposes of conducting business.
- To immediately cancel my permit(s) if the business relocates outside of the permit area.
- All permit(s) will be canceled and vehicles will be subject to citation if improper use is demonstrated.

Signature (*Type your full name*)

Date:



The City of Portland ensures meaningful access to city programs, services, and activities to comply with Civil Rights Title VI and ADA Title II laws and reasonably provides: translation, interpretation, modifications, accommodations, alternative formats, auxiliary aids and services. To request these services, contact 503-823-5185, City TTY 503-823-6868, Relay Service: 711.