



# Change / Cancellation Request Form \*Monthly Parking\*

**SERVICE CHANGE REQUESTED:**

CANCEL ACCOUNT     CHANGE PERMIT TYPE     CHANGE CONTACT INFORMATION

\*Please note: If you have a monthly e-permit, you can make changes to your permitted vehicle license plates at any time by simply logging in to your online account: <http://j.mp/SacEpermits>

**DETAILS OF REQUEST:**

INDIVIDUAL     CARPOOL     COMPANY     DEPARTMENT PAID PARKING

Facility Location or Garage Name: \_\_\_\_\_

Desired Effective Date of Change: \_\_\_\_ / \_\_\_\_ / \_\_\_\_

Name(s) on Account: \_\_\_\_\_

Email: \_\_\_\_\_

Phone Number(s): \_\_\_\_\_

Customer Account # or Access Card #: \_\_\_\_\_

Vehicle License Plate Number: \_\_\_\_\_

Comments: \_\_\_\_\_

**SIGNATURE:** \_\_\_\_\_ **DATE:** \_\_\_\_\_

Please submit change requests two weeks before your permit renewal date to allow for processing. This form may be mailed, faxed, emailed, or physically delivered to:

**Physical Address:**

City of Sacramento, Revenue Services  
915 I Street, Room 1214  
Sacramento, CA 95814

**Mailing Address:**

City of Sacramento, Parking Services Division  
300 Richards Blvd., Second Floor  
Sacramento, CA 95811

Fax: (916) 808-5115 (Mon-Fri 8:30am-4:30pm) | Phone: (916) 808-5110 | Email: [ParkingCSR@cityofsacramento.org](mailto:ParkingCSR@cityofsacramento.org)

*\*Please do not email credit card information. Any payment information should be faxed, mailed, or hand-delivered.*

**Parking Services Office Use:**

EFFECTIVE DATE: \_\_\_\_ / \_\_\_\_ / \_\_\_\_    PAYMENT AMOUNT: \$ \_\_\_\_\_    PERMIT TYPE: \_\_\_\_\_

ACCOUNT #: \_\_\_\_\_    DATE PROCESSED: \_\_\_\_ / \_\_\_\_ / \_\_\_\_    PARKING REP INITIALS: \_\_\_\_\_

ADDITIONAL NOTES: \_\_\_\_\_