

City of Santa Fe

**Cancellation Form**

**Billing will continue until this completed form**

**and the permit are returned,** even if it is in pieces**.**

Contact us at (505) 955-6581 or visit us at [www.santafenm.gov/parking](http://www.santafenm.gov/parking)

Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

# Account Information:

**Required Fields** (\*) **PLEASE PRINT!**

\*Account Number: Account Name:

\*Type of Permit: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\*Billing Address:

\*Email Address: \*Phone:

# Permit Information…

\*Permit Number:

Permit #\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Type of Permit:

\*Is Permit being returned now? ☐Yes ☐No

\*Person submitting this form: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

#  Comments:

**Lost/Not returned Permits will incur a $52.50 Fee**

Authorized Parking Division Representative: