

Homes Association of Cedar Hills  
9900 SW Wilshire St. Ste. 109  
Portland, Oregon 97225  
Phone: 503-292-1259 • Fax: 503-292-1148

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**APPLICATION FOR CAR COVER PERMIT**

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IMPORTANT: This application must be completed in its entirety. Any incomplete or incorrect portions or failure to give adequate explanation of why parking (of the restricted vehicle) is necessary at the designated lot could constitute grounds for denial of the application.

OWNER

OR

TENANT

NAME: \_\_\_\_\_

PROPERTY ADDRESS: \_\_\_\_\_

MAILING ADDRESS: \_\_\_\_\_

HOME PHONE: \_\_\_\_\_ ALTERNATIVE PHONE: \_\_\_\_\_

EMAIL: \_\_\_\_\_

Explain the reason for the request, a description of the vehicle covering all pertinent details (type, model, size, color etc.). Specify the periods of time for which the permit is requested.

Make: \_\_\_\_\_

Color: \_\_\_\_\_

Model: \_\_\_\_\_

License Plate: \_\_\_\_\_

Size: \_\_\_\_\_

Other: \_\_\_\_\_

**\*NOTE:**

If the request is for up to 2 weeks **you need to contact the office** and give the date and time of when the vehicle will be covered at the property, **no written** permit is required.

If the request is for more than 2 weeks, an Association permit is required (check this box)

The board permit committee meets (at present) most Thursday mornings.

Explanation:

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Starting and Ending Date(s): \_\_\_\_\_

NOTE: You must notify all property owners whose properties adjoin (on either side) your property plus any properties situated across the street from your property. Owners signing below and indicating support or opposition will not mean the permit will be approved or denied.

The Board will take into consideration these opinions in its decision.

Signature & Address of neighbor	Support	Oppose	Comments
1.			
2.			
3.			
4.			
5.			
6.			
7.			
8.			

I understand that by submitting this application I agree: That the Association may place any conditions, or restrictions, on any permit it may issue; that the Association may bring an action to enjoin me from parking within the Association if the vehicle type deviates from the description in the application or any conditions or restrictions imposed by the Association.

By Signing this application I agree: The aforementioned vehicle is not commercial nor inoperable and is in compliance with the CC&Rs.

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

Signature: \_\_\_\_\_

Owner       Tenant

**For Office Use Only**

Date Received: \_\_\_\_\_ Permit No. \_\_\_\_\_

Plat: \_\_\_\_\_ Block: \_\_\_\_\_ Lot: \_\_\_\_\_

Action: Approved ( ) Denied ( ) Conditions \_\_\_\_\_

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

By: \_\_\_\_\_ Director