



City of Berkeley Residential Preferential Parking Program  
Child Care Permit Affidavit

I, \_\_\_\_\_, am the parent or custodian of the following child(ren), who are twelve (12) years of age or younger, who reside with me and require childcare at the following address:

\_\_\_\_\_.

Child(ren) – Attach copy of birth certificate for each child:

Name: \_\_\_\_\_ Birthdate: \_\_\_\_\_

Name: \_\_\_\_\_ Birthdate: \_\_\_\_\_

Name: \_\_\_\_\_ Birthdate: \_\_\_\_\_

Under penalty of perjury the following declarations are made:

- a. The undersigned is the owner or authorized agent of the owner of this property.
- b. The Child Care Permit issued to me will be used by my childcare provider only for parking in the designated Residential Preferential Parking (RPP) area while performing childcare responsibilities and activities for the above children.
- c. The information presented is true and correct to the best of my knowledge.

\_\_\_\_\_  
**SIGNATURE: RESIDENTS SIGNATURE**

\_\_\_\_\_  
**DATE**

**For COB Staff Use Only:**

Permit Number Issued: \_\_\_\_\_

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