



# PARKING SALES CONTRACT

## City of Helena Parking

225 N. Cruse Ave, Helena Montana, 59601

(406) 447-8419

ACCOUNT NAME	
BILLING ADDRESS <small>Street address , City , State , Zip Code</small>	
PERMIT HOLDERS NAME <small>(ATTACH LIST IF MULTIPLE)</small>	
CONTACT PHONE #	
EMAIL ADDRESS	

The undersigned (herein called Permit Holder) contracts with City of Helena Parking , the following services

FACILITY	PERMIT HOLDER	PLATE #	PERMIT #	RATE

**CONDITIONS OF PARKING PERMITS:** 1. Valid only for month indicated 2. Permits must be clearly displayed in vehicle while parked at all times. 3. The acceptance of this permit relieves the issuer or it's agent of any responsibility for damages to or loss of vehicle, its contents or accessories from any cause whatsoever. 4. Payment is due by the 25th of each month. 5. Unused permits must be returned to the City of Helena Parking Office by the 5th of the month for credit 6. Replacement of a lost permit or control card: \$10.00 7. Accounts 60 days past due will be suspended until paid in full

I, the permit holder have received a copy of this parking contract and agree to the terms stated above.

X \_\_\_\_\_

DATE: \_\_\_\_\_