

APPROVED: _____

DATE: _____



CITY OF COLUMBIA, MO
PUBLIC WORKS DEPARTMENT
PARKING UTILITY

Telephone: 573-874-7250

Fax: 573-874-7132

www.GoColumbiaMo.com (search: GoParking)

PLASTIC COVERS

(Only for situations known to be less than 48 hours)

General Information:

1. There is a charge of eight dollars (\$8.00) for a single meter cover or sixteen dollars (\$16.00) for a double meter cover per day (Sundays and municipal holidays excluded). There is a one-day minimum charge on all covers issued. All charges must be paid when covers are issued.
2. Plastic covers must be tied on. Money will not be refunded if the meter cover is lost or stolen. You must report it immediately to the Public Works Department at 573-874-7250 to obtain replacement cover(s).
3. Plastic covers will be marked with the company's name and date(s) to be used.
4. Covers need to be attached to meters at least four (4) hours in advance for Public Works to enforce. Please contact Parking Enforcement at 573-874-7674 to advise when covers are in place. Please leave a voice mail message.
5. Parking is enforced from 8:00 AM through 6:00 PM (Monday - Saturday) except for City recognized Holidays.

APPLICATION FOR PARKING METER COVERS

(Please apply a minimum of 24 hours before covers are needed.)

Name of Applicant _____

Date _____

Address _____

Telephone _____

Dates covers will be in use _____

Number of spaces requested _____

These plastic covers are available for the convenience of the customer. There is no deposit; they must be paid for in advance. They are to be used ONLY in situations where the rental period is positively known to be less than 48 hours. They are not to be used for any construction project.

THE FOLLOWING INFORMATION IS REQUIRED
COVERS WILL NOT BE APPROVED WITHOUT THIS INFORMATION

PLEASE SPECIFY EXACT LOCATION REQUIRED & WHY THE SPECIFIED SPACE(S) MUST BE RESERVED FOR SOLE USE BY APPLICANT (i.e. concert bus parking, off-loading students from school buses, etc.):

METER NUMBERS: _____

I have read and understand the policies stated above:

Signed: _____

Printed: _____

Amount Charged \$ _____ OFFICE USE
Cash or Check # _____ Issued by: _____

Date & Time Cover(s) Issued: _____ Date(s) To Be Used: _____