



Parking Administration

Low Income Payment Plan Application

Instructions:

Payment plans will only be issued to the registered owner or lessee of a vehicle. To be approved for a payment plan you must be within 120 days from date of issuance or 10 days from the Administrative Hearing decision date. If approved a \$5 payment plan fee will be assessed to each citation.

Please fill out section "A". Attach a copy of your legal photo ID with signature. To qualify for a payment plan you must meet the qualifications listed in either section "B" or "C". Sign and return the application to one of the address below.

A: CONTACT INFORMATION

Name:	Email:
Address:	Number of people in household including self:

Citation 1:	Plate 1:	Citation 4:	Plate 4:
Citation 2:	Plate 2:	Citation 5:	Plate 5:
Citation 3:	Plate 3:	Citation 6:	Plate 6:

B: PUBLIC BENEFITS VERIFICATION

Please check no more than two that apply. Proof of receipt of benefits is required when submitting application.

- Supplemental Security Income (SSI)
- State Supplementary Payment (SSP)
- California Work Opportunity and Responsibility to Kids Act (CalWORKs)
- Supplemental Nutrition Assistance Program (EBT)
- County Relief, General Relief (GR), or General Assistance (GA)
- Cash Assistance Program for Aged, Blind, and Disabled Legal Immigrants
- In-Home Supportive Services (IHSS)
- Med-Cal
- California Special Supplemental Nutrition Program for Women, Infants, and Children (WIC Program)
- Unemployment Compensation

C: INCOME VERIFICATION

Income must be 200 percent or less of current poverty guidelines. Please check what you will be providing to meet this qualification. Attach documentation.

- Last two months of paycheck stubs
- Last two bank statements
- Last income tax return

I certify under penalty of perjury that the foregoing information is true and correct to the best of my knowledge.

Signature: _____

Email to: Parking@sandiego.gov

Or

Mail to: Parking Administration
PO Box 129038
San Diego CA 92112