



**CITY OF PALM DESERT
DEPARTMENT OF DEVELOPMENT SERVICES**

73510 Fred Waring Drive, Palm Desert, California 92260
Phone (760) 776-6435 • Fax (760) 776-6392 • permitcenter@cityofpalmdesert.org

RECREATIONAL VEHICLE PERMIT APPLICATION

Applicant Name: _____

Phone: _____

Mailing Address: _____ Fax: _____

City: _____ State: _____ Zip: _____ Email: _____

Recreational Vehicle Address: _____

Assessor Parcel No: _____ **Existing Zoning:** _____

Vehicle Type: _____ **Make:** _____ **License Plate No:** _____

Request (Describe the Specific Nature of Approval Requested):

Property Owner Authorization: The undersigned states that they are the owner(s) of the property described and herein give authorization for the filing of the application.

Print Name: _____ **Signature:** _____ **Date:** _____

Applicant Signature: By signing this application, I certify that the information provided is accurate. I understand that the City might not approve what I am applying for and/or might require conditions of approval.

Print Name: _____ **Signature:** _____ **Date:** _____

OFFICE USE ONLY

Project No: RV _____

Date Received: _____

Received By: _____

Case Planner: _____