

# CITY OF OAKLAND



REVENUE MANAGEMENT BUREAU - 150 FRANK H. OGAWA PLAZA, SUITE 5342  
OAKLAND, CA 94612

## Parking Garage Refund Request Form

TEL (510) 238-2972

FAX (510) 238-6431

To request a refund for a parking meter, you must first report the non-working meter to the Oakland 311 Call Center using the Mobile app: [OAK 311](#) for [iPhone](#) or [Android](#), or visiting the website at [311.oaklandca.gov](#) or by calling the Public Works Call Center at 311 inside of Oakland or (510) 615-5566 anywhere. You will need the Service Request number provided by Public Works to complete this form. Please complete all sections of this form, attach all necessary documentation, and submit in person to the address above **within 30 days from the incident date. Incomplete or illegible forms will not be processed.** The maximum refund is **\$1.00**, limited to two times a year per person. **All parking meter coin refund requests must be done in person.**

### Contact Information

Name: \_\_\_\_\_ Today's Date: \_\_\_\_\_  
Address: \_\_\_\_\_ Phone #: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_ Email: \_\_\_\_\_

### Transaction Information

IPS/Cale Meter #: \_\_\_\_\_ Date of Transaction: \_\_\_\_\_  
Amount of Transaction: \_\_\_\_\_ Time of Transaction: \_\_\_\_\_

### Required Documentation

Public Works Service Request #: \_\_\_\_\_

**This is required. Your request will not be reviewed without a request number.**

ID (Circle One):      Driver License      State ID      Passport  
State: \_\_\_\_\_ Number: \_\_\_\_\_ Expiration: \_\_\_\_\_

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

### For Office Use Only

Refund Approved (Circle One):    Yes    No      Comments: \_\_\_\_\_

Amount of Refund: \$ \_\_\_\_\_ Reviewed By: \_\_\_\_\_ Date Reviewed: \_\_\_\_\_

Approved By: \_\_\_\_\_ Date Approved: \_\_\_\_\_

### Acknowledgement of Refund (DO NOT SIGN UNTIL REQUESTED TO DO SO BY CITY STAFF)

I, \_\_\_\_\_, acknowledge receipt of \$ \_\_\_\_\_ as a refund of a coin payment made with an inoperable parking meter as requested on this form. All of the information provided is true and correct to the best of my knowledge.

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