

Welcome John!

Your account has been created successfully. Please complete your profile.

Account Details

First Name	Last Name
<input type="text" value="John"/>	<input type="text" value="Doe"/>
Middle Name	Username
<input type="text" value="Kite"/>	<input type="text" value="jdoe123"/>
Email Address	
<input type="text" value="Email Address"/>	

Date of Birth, Address and Contact Details

Date of Birth *	
<input type="text" value="Select Date"/> 	
Street Address	Apt/Flr/Ste Number
<input type="text" value="Street Address"/>	<input type="text" value="Apt/Flr/Ste Number"/>
Country	State
<input type="text" value="Country"/> ▾	<input type="text" value="State"/> ▾
City	Zip Code
<input type="text" value="City"/>	<input type="text" value="Zip Code"/>
Borough	Phone Number
<input type="text" value="Borough"/>	<input type="text" value="xxx-xxx-xxxx"/>

General Instructions

- Form should take 5-10 minutes to complete
 - All answers must be in English
 - You will need to upload a photo of a drivers license, state ID, or municipal ID to prove your identity.
- We respect your privacy and will not use your info for any purposes

Communication Preference

Communication Method *

Regular Mail Email

General Instructions

- Form should take 5-10 minutes to complete
- All answers must be in English

Security Questions

Security Question 1	Your Answer
<input type="text" value="Question"/> ▾	<input type="text" value="Answer"/>
Security Question 2	Your Answer
<input type="text" value="Question"/> ▾	<input type="text" value="Answer"/>
Security Question 3	Your Answer
<input type="text" value="Question"/> ▾	<input type="text" value="Answer"/>

General Instructions

- Form should take 5-10 minutes to complete
- All answers must be in English
- You will need to upload a photo of a drivers license, state ID, or municipal ID to prove your identity.
- We respect your privacy and will not use your info for any purposes

Documents to Upload

Document Type	Document Number
<input type="text" value="Drivers License ID"/> ▾	<input type="text" value="ABC 1234"/>

Document(s)

[Drivers License, State Issued Photo ID, Municipality ID](#)

Drop your files here

Or

[Browse](#)

Uploaded Document	Document Note
 Drivers License.pdf	<input type="text" value="Lorem Ipsum"/> 

I certify that the information contained in this application is correct to the best of my knowledge.

[Complete Profile](#)

If the user created APA account with "Username" alone, the user can add email address in the Profile page.

Email option will be disabled if there is no email added in the system during account creation.

Security questions will be captured on the Account Creation page incase the user chooses to create an account with Username.

In that case, Security Questions will be prepopulated and can be edited.



Select account

Individual - Parking Permits ▾

Add Organization

[Dashboard](#) [Applications](#) [Permits](#) [Documents](#)

Summary of Applications and Permits

Applications - Need more Information

No Data Available

Permits - Intended to Revoke

No Data Available

Applications Overview by Status

Go to [Applications](#) to start a new Application.

Permits Overview by Status

No Data Available.

Select account

Individual - Parking Permits ▾

Add Organization

Dashboard Applications Permits Documents

My Profile

Edit Profile

Reset Password

Account Details

First Name

John

Last Name

Doe

Middle Name

Kite

Username

jdoe123

Email Address

jdoe123@email.com

 Please click on the verification link sent to your email address. [Resend Email Verification Link.](#)

Date of Birth, Address and Contact Details

Date of Birth

1/16/1070

Street Address

100 Happy Ave

Apt/Flr/Ste Number

Apt 300

Country

United States of America ▾

State

New York ▾

City

New York

Zip Code

10011

Borough

Staten Island ▾

Phone Number

111-222-3344

Communication Preference

 Regular Mail

 Email

Security Questions

Security Question 1

Question ▾

Your Answer

Answer

Security Question 2

Question ▾

Your Answer

Answer

Security Question 3

Question ▾

Your Answer

Answer

Documents Information

Document Type

Drivers License ID ▾

Document Number

ABC 1234

[Hide Documents History](#)

Document Type	Submission Date	Document Number	Status	Status Effective Date
Drivers License ID	1/30/2020	ABC1234	Active	1/30/2020
Municipality ID	1/30/2019	123 456 789	Inactive	12/31/2019
State ID	1/30/2018	999 888 7766	Inactive	12/31/2018

If the user created APA account with "Username" alone, the user will have a provision to add email address in the Account Details section upon clicking on Edit button.

Upon clicking on Save Changes a note is displayed about the verification link sent to the user's email address.

Resend Verification Link button appears on the page for 48 hours.



Select account

Individual - Parking Permits

[Add Organization](#)

[Dashboard](#)

[Applications](#)

[Permits](#)

[Documents](#)

My Profile

Reset Password

Password must be at least 8 characters and must be a combination of upper case, lower case, numbers and special characters.

New password

Repeat new password

[Cancel](#)

[Reset Password](#)



Select language

English

Apply for a NYC parking or Travel permit

Sign in & apply permits today

Username or Email Address

[Forgot Username?](#)

[Forgot Password?](#)

I'm not a robot



Continue

Not a user? [Create an Account](#)

Are you a Physician? [Upload Here](#)



FAQ

Lorem ipsum dolor sit amet, consectetur adipiscing elit, sed do eiusmod tempor.

[Learn More](#)



Lost or Stolen?

Lorem ipsum dolor sit amet, consectetur adipiscing elit, sed do eiusmod tempor.

[Learn More](#)



Permanent Vehicle Change (PVC)

Lorem ipsum dolor sit amet, consectetur adipiscing elit,

[Learn More](#)

Individuals Permits - People with Disabilities

Government Permits

Organization Permits



NYC Parking Permit for People with Disabilities (NYC - PPPD)

Issued to people who has a disability that severely and permanently impairs mobility

[Learn More](#)



NYS Parking Permit, Blue and Red hang tag (NYS - Hang tag)

Issued to people who are eligible to obtain a New York State parking permit, only if the person is certified by a physician

[Learn More](#)



Select language

English

Thank you for Choosing APA. Select an option that best suits your needs.

[< Back](#)

Create an Account



All users need to create an account. If you don't have an email address and need to create an account, use a UserID. If you represent a Government

[Create](#)

Register Agency



Please click the button below to register your Agency.

[Learn more about Agency Permits](#)[Register](#)

Register Organization



Please click the button below to register your Organization

[Learn more about Organization Permits](#)[Register](#)



Select language

English ▾

Your account setup is just a minute away.

[← Back](#)

Create Account

Username or Email Address

Username or Email address

Check Availability

Individual Account



You can apply for individual disability permits.

Government Account



You can manage your government agency in a designated role and apply for eligible permits

Organization Account



You can manage your Organization in a designated role and apply for eligible permits

Continue

The Create Account button is disabled until the user clicks on the recaptcha checkbox.

A message pertaining to the availability of username/email address will be displayed here.

If the individual provides an email address (for example gmail address), both the Individual Account and Organization account cards are highlighted for the user.



Select language

English

[Back](#)



Individual Account

Profile Details

First Name

First Name

Last Name

Last Name

Middle Name

Middle Name

Username

Jdoe123

✓ This username is available.

Password

Password

Confirm Password

Confirm Password

Security Questions

Security Question 1

Question

Your Answer

Answer

Security Question 2

Question

Your Answer

Answer

Security Question 3

Question

Your Answer

Answer

I certify that the information contained in this application is correct to the best of my knowledge.

I'm not a robot



reCAPTCHA

Create Account

General Instructions

- Form should take 5-10 minutes to complete
 - All answers must be in English
 - You will need to upload a photo of a drivers license, state ID, or municipal ID to prove your identity.
- We respect your privacy and will not use your info for any purposes

General Instructions

- Form should take 5-10 minutes to complete
- All answers must be in English
- You will need to upload a photo of a drivers license, state ID, or municipal ID to prove your identity.
- We respect your privacy and will not use your info for any purposes

A message pertaining to the availability of username/email address will be displayed here.

All the validations happening for this field in the user journey will happen on this page as well.



Account created Successfully!

Here's Next...

1. Please [Sign in](#) with your new credentials.
2. Complete your profile information.
3. Start applying for permits.



Select language

English ▾

[← Back](#)



Government Account

Profile Details

First Name

First Name

Last Name

Last Name

Middle Name

Middle Name

Email Address

Jdoe@doc.nyc.gov

✓ This email address is available.

Password

Password

Confirm Password

Confirm Password

I certify that the information contained in this application is correct to the best of my knowledge.

I'm not a robot



reCAPTCHA

Create Account

General Instructions

- Form should take 5-10 minutes to complete
- All answers must be in English
- You will need to upload a photo of a drivers license, state ID, or municipal ID to prove your identity.

We respect your privacy and will not use your info for any purposes

A message pertaining to the availability of username/email address will be displayed here.

All the validations happening for this field in the user journey will happen on this page as well.



Select language

English

Apply for a NYC parking or Travel permit

Sign in & apply permits today

Username or Email Address

jdoe@gmail.com



[Forgot Username?](#)

Password

[Forgot Password?](#)

I'm not a robot



Sign In

Not a user? [Create an Account](#)

Are you a Physician? [Upload Here](#)



FAQ

Lorem ipsum dolor sit amet, consectetur adipiscing elit, sed do eiusmod tempor.

[Learn More](#)



Lost or Stolen?

Lorem ipsum dolor sit amet, consectetur adipiscing elit, sed do eiusmod tempor.

[Learn More](#)



Permanent Vehicle Change (PVC)

Lorem ipsum dolor sit amet, consectetur adipiscing elit,

[Learn More](#)

Individuals Permits - People with Disabilities

Government Permits

Organization Permits



NYC Parking Permit for People with Disabilities (NYC – PPPD)

Issued to people who has a disability that severely and permanently impairs mobility

[Learn More](#)



NYS Parking Permit, Blue and Red hang tag (NYS – Hang tag)

Issued to people who are eligible to obtain a New York State parking permit, only if the person is certified by a physician

[Learn More](#)

Select language

English

[← Back](#)


Register Government Agency

Lookup Government Agency

Lookup Government Agency

Enter agency code or agency name

 Can't find agency?

Agency Name *

Agency Name

Agency Code *

1234

Agency Information

Agency Type *

 New York City
 New York State
 Federal
 Other Govt. Agency

Street Address *

Street Address

Apt/Fir/Ste Number *

Apt/Fir/Ste Number

Country *

Select from the list

State *

Select from the list

City *

City

Zip *

Zip Code

Borough *

Select from the list

Eligible Permits to Apply (Please select at least one)

 ABPP
 CAPP
 AAOSP
 HTP

Primary Contact Information

First Name *

First Name

Last Name *

Last Name

Middle Name *

Middle Name

Primary Phone Number *

Select from the list

Email Address *

City

Documents to Upload (Click on the document titles to view the corresponding samples)

Primary Contact Authorization Letter, Letter of Request, Letter from Dept. Education, Tax exemption form, IRS Tax Letter, Contract, Medical Document.

Drop your files here

Or

[Browse](#)

Uploaded File	File Type	Notes
File 1.pdf	Letter of Request, Contract,	Lorem Ipsum
File 2.pdf	Medical Document	Lorem Ipsum
File 3.pdf	Vehicle Registration Document	Lorem Ipsum
File 4.pdf	Letter from Dept. of Education	Lorem Ipsum
File 5.jpg	Letter of Request,	Lorem Ipsum
File 6.jpg	Select all that apply	Lorem Ipsum
File 7.jpg	<input type="checkbox"/> Letter of Request	Lorem Ipsum
File 8.jpg	<input type="checkbox"/> Contract	Lorem Ipsum
File 9.jpg	<input type="checkbox"/> Medical Document	Lorem Ipsum
File 9.jpg	<input type="checkbox"/> IRS Tax Letter	Lorem Ipsum
File 10.jpg	<input type="checkbox"/> Ta Exemption Form	Lorem Ipsum

 I certify that the information contained in this application is correct to the best of my knowledge. I understand that the misrepresentation or omission of facts called for is cause for dismissal of the application or rejection of permit without any prior notice.


I'm not a robot



reCAPTCHA

Please click on checkbox to verify.

Register Agency

General Instructions

- Form should take 5-10 minutes to complete
- All answers must be in English
- Depending on which permits you will be applying for the required paperwork will change. A list of needed documents is shown below.

General Instructions

- Form should take 5-10 minutes to complete
- All answers must be in English
- Depending on which permits you will be applying for the required paperwork will change. A list of needed documents is shown below. You must have all the appropriate paperwork signed and scanned for uploading to complete the form

We respect your privacy and will not use your info for any purposes

General Instructions

- Depending on which permits you will be applying for the required paperwork will change. A list of needed documents is shown below.

General Instructions

- Form should take 5-10 minutes to complete
- Depending on which permits you will be applying for the required paperwork will change. A list of needed documents is shown below. You must have all the appropriate paperwork signed and scanned for uploading to complete the form

General Instructions

- Form should take 5-10 minutes to complete
- All answers must be in English
- Depending on which permits you will be applying for the required paperwork will change. A list of needed documents is shown below. You must have all the appropriate paperwork signed and scanned for uploading to complete the form

We respect your privacy and will not use your info for any purposes



Select language

English

[Back](#)



Register an Organization

Organization Details

Organization Name* <small>Organization Name</small>	EIN/Fed Tax ID * <small>EIN/Fed Tax ID</small>
Street Address * <small>Street Address</small>	Apt/Flr/Ste Number * <small>Apt/Flr/Ste Number</small>
Country * <small>Select from the list</small>	State * <small>Select from the list</small>
City * <small>City</small>	Zip * <small>Zip Code</small>
Borough * <small>Select from the list</small>	

The organization address entered above is not in the USPS repository.
Please select this checkbox if you still like to save the changes.

Eligible Permits to Apply (Please select at least one)

NYS PPPD
 AAOSP
 AOSPP
 Single-use On Street
 Clergy
 Street Travel
 Highway Travel
 Express Lane
 9/11 Bus

Organization Type

Organization Type*
Organization Type

Non-Profit Organization

DFTA
 VAS
 Not Applicable

Primary Contact Information

First Name * <small>First Name</small>	Last Name * <small>Last Name</small>
Email Address * <small>Email Address</small>	Contact Number * <small>Contact Number</small>

Documents to Upload (Click on the document titles to view the corresponding samples)

[Primary Contact Authorization Letter](#),
 [Letter of Request](#),
 [Letter from Dept. Education](#),
[Tax exemption form](#),
 [IRS Tax Letter](#),
 [Contract](#),
 [Medical Document](#).

Drop your files here

Or

[Browse](#)

Uploaded File	File Type	Notes
File 1.pdf	Letter of Request, Contract,	Lorem Ipsum
File 2.pdf	Medical Document	Lorem Ipsum
File 3.pdf	Vehicle Registration Document	Lorem Ipsum
File 4.pdf	Letter from Dept. of Education	Lorem Ipsum
File 5.jpg	Letter of Request,	Lorem Ipsum
File 6.jpg	Select all that apply	Lorem Ipsum
File 7.jpg	<input type="checkbox"/> Letter of Request	Lorem Ipsum
File 8.jpg	<input type="checkbox"/> Contract	Lorem Ipsum
File 9.jpg	<input type="checkbox"/> Medical Document	Lorem Ipsum
File 9.jpg	<input type="checkbox"/> IRS Tax Letter	Lorem Ipsum
File 10.jpg	<input type="checkbox"/> Ta Exemption Form	Lorem Ipsum

I certify that the information contained in this application is correct to the best of my knowledge. I understand that the misrepresentation or omission of facts called for is cause for dismissal of the application or rejection of permit without any prior notice.

I'm not a robot

Please click on checkbox to verify.

Register Organization

General Instructions

- Form should take 5-10 minutes to complete
- All answers must be in English
- Depending on which permits you will be applying for the required paperwork will change. A list of needed documents is shown below. You must have all the appropriate paperwork signed and scanned for uploading to complete the form
- We respect your privacy and will not use your info for any purposes

General Instructions

- Depending on which permits you will be applying for the required paperwork will change. A list of needed documents is shown below.

General Instructions

- Depending on which permits you will be applying for the required paperwork will change. A list of needed documents is shown below.

General Instructions

- Depending on which permits you will be applying for the required paperwork will change. A list of needed documents is shown below.

General Instructions

- Form should take 5-10 minutes to complete
- Depending on which permits you will be applying for the required paperwork will change. A list of needed documents is shown below. You must have all the appropriate paperwork signed and scanned for uploading to complete the form

General Instructions

- Form should take 5-10 minutes to complete
- All answers must be in English
- Depending on which permits you will be applying for the required paperwork will change. A list of needed documents is shown below. You must have all the appropriate paperwork signed and scanned for uploading to complete the form
- We respect your privacy and will not use your info for any purposes



Select language

English ▾

[← Back](#)



Organization Account

Profile Details

First Name

First Name

Last Name

Last Name

Middle Name

Middle Name

Email Address

Jdoe@smilefoundation.com

✓ This email address is available.

Password

Password

Confirm Password

Confirm Password

I certify that the information contained in this application is correct to the best of my knowledge.

I'm not a robot



reCAPTCHA

Please click on checkbox to verify.

Create Account

General Instructions

- Form should take 5-10 minutes to complete
- All answers must be in English
- You will need to upload a photo of a drivers license, state ID, or municipal ID to prove your identity.

We respect your privacy and will not use your info for any purposes

A message pertaining to the availability of username/email address will be displayed here.

All the validations happening for this field in the user journey will happen on this page as well.