CITY OF BURBANK

VALET PARKING APPLICATION

(All forms shall be filed with the Department of Public Works thirty (30) days prior to the date requested for issuance of the permit)

(Please print or type)

VALET OPERATOR NAME __________________________ APPLICATION DATE _______ / ______ / ______

ADDRESS __________________________ CITY ___________ STATE ___ ZIP ________

BUSINESS NAME __________________________ BUSINESS LICENSE __________________________

☐ SOLE OWNERSHIP ☐ PARTNERSHIP ☐ CORPORATION

CONTACT PERSON AND TELEPHONE NUMBER:
(Must be available at all times during hours of valet operation)

NAME __________________________

PHONE # _______________________ CELL # ______________________

E-MAIL ADDRESS __________________________

LOCATION OF VALET OPERATION __________________________

DAYS OF VALET OPERATION __________________ HOURS OF OPERATION __________________

NUMBER OF VALET ATTENDANTS ___________ MAXIMUM # OF VEHICLES TO BE PARKED AT ANY ONE TIME ___________

LOCATION WHERE VEHICLES WILL BE STORED __________________________
(IDENTIFY PARKING STRUCTURE OR LOT)

THE FOLLOWING ITEMS ARE TO BE ATTACHED TO YOUR COMPLETED APPLICATION:

☐ Certificate of Insurance

☐ A circulation map indicating the routes to be used between the passenger loading zone and the vehicle storage location, and back to the initial drop-off point.

☐ A copy of a written contract, license or lease between you (or your establishment) and the owner of any parking facility or storage area designated as the vehicle storage location.

☐ A copy of a valid driver’s license for all valet attendants employed by your company working in the City of Burbank.

☐ A list of the name and address of every officer or partner and every owner of 10% or more of your business.

All valet operation is subject to the rules and regulations of the City of Burbank Valet Parking Ordinance (BMC Chapter 29).

By signing below, you acknowledge that you have received a copy of Burbank’s Valet Parking Ordinance and agree to abide by all the rules and regulations of the ordinance.

Return the completed form to:

Signature of Valet Operator __________________________

Printed Name __________________________

Date __________________________

City of Burbank
Public Works – Traffic Engineering
333 East Olive Avenue
Burbank CA 91502

(818) 238-3915 - Phone
(818) 238-3918 - FAX
CITY OF BURBANK

VALET PARKING PERMIT APPLICATION CHECKLIST

TO BE INITIALED BY CITY STAFF:

PUBLIC WORKS DEPARTMENT:

_____ Completed, signed application form
Initials Date

_____ Certificate of Insurance
Initials Date

_____ Map of pick-up and return route from valet drop-off
to vehicle storage location
Initials Date

_____ Written contract or covenant between valet operator and owner
of facility designated as the vehicle storage location.
Initials Date

FEES:

_____ Payment of valet application fee
Initials Date

Amount paid: ____________

_____ Street use fee – if applicable (monthly thereafter)
Initials Date

Amount paid: ____________

LICENSE AND CODE DIVISION:

_____ Annual Business Tax – fees apply
Initials Date

Business Tax # ________________

New valet operator: $300.00
Annual Renewal: $75.00
Temporary Valet: $150.00