



**SPECIAL EVENT COMMERCIAL PARKING LOT
PERMIT APPLICATION**

101 W. Abram St, Arlington, TX 76010, 817-459-6502

Parking Area Property Information

Property Address: _____
 Current Zoning: _____
 Current Property Use: _____
 Number of Parking Spaces: _____
 Is there an existing Shared Parking Agreement for this property?: _____

| <u>Applicant Information*</u> |
|--------------------------------------|
| Name: _____ |
| Address: _____ |
| City: _____ |
| State: _____ Zip Code: _____ |
| Sales Tax ID #: _____ |
| Telephone: _____ |
| Email: _____ |
| Fax: _____ |
| *The Lot Operator/Responsible Party |

| <u>Property Owner Information*</u> |
|---|
| Name: _____ |
| Address: _____ |
| City: _____ |
| State: _____ Zip Code: _____ |
| Sales Tax ID #: _____ |
| Telephone: _____ |
| Email: _____ |
| Fax: _____ |
| *Fill out only if Owner is not Applicant |

To Complete the Application, Applicant must provide the following:

| <u>Staff</u> | <u>Applicant</u> | <u>For Review</u> |
|--------------------------|--------------------------|--|
| <input type="checkbox"/> | <input type="checkbox"/> | <u>Copy of General Liability Insurance Certificate</u> , including Independent Contractor's Liability, Completed Operations and Contractual Liability, fully insuring Operator/Responsible Party's liability for injury to or death of third parties, extended to include personal injury liability coverage and for damage to property of third parties, with a minimum limit of \$1,000,000.00 per occurrence/\$2,000,000 annual aggregate. |
| <input type="checkbox"/> | <input type="checkbox"/> | <u>Parking Site Plan</u> , to scale, showing site layout, dimensions, aisle width, handicapped spaces, ingress and egress, parking space number and arrangement, placement of required sign, paving, lighting, number and placing of parking attendants, placement of cash-handling area, and building square footage. The plan shall be no larger than 11" X 17". |
| <input type="checkbox"/> | <input type="checkbox"/> | <u>Notarized Authorization Statement and Affidavit</u> , provided on page two and three of this application. |
| <input type="checkbox"/> | <input type="checkbox"/> | <u>Copy of Valid Texas Sales Tax Permit</u> |

STATE OF TEXAS

§

KNOW ALL BY THESE PRESENTS:

§

COUNTY OF _____ §

BEFORE ME, the undersigned authority, personally appeared the person who has signed below, who, being by me duly sworn, deposed as follows:

“I am of sound mind, capable of making this affidavit, and personally acquainted with the facts herein stated. I have personal knowledge of the facts contained in this affidavit. The facts stated herein are all true and correct.

“I swear and affirm that I am the owner (or the authorized signatory on behalf of the owner) of the property located at _____(address) and that there is an active nonresidential use at that location..”

PRINT NAME OF AFFIANT(Owner or Owner’s signatory)

SIGNATURE OF AFFIANT (Owner or Owner’s signatory)

DATE

Subscribed and sworn to before me on this _____ day of _____, 20____.

Notary Public in and for the State of Texas