CITY OF HACKENSACK
CITY HALL, 65 CENTRAL AVENUE, HACKENSACK, NJ 07601

APPLICATION FOR VALET PARKING OPERATOR ANNUAL PERMIT

Valet Parking Operator Business Name______________________________________________

Business Address _______________________________________________________________

Type of Business (e.g. sole proprietor/partnership/corporation/LLC):______________________

(Please also complete the attached Valet Parking Operator Ownership Disclosure Certification)

Contact Person ______________________ Phone_______________E-mail_________________

Statement of Experience Providing Valet Parking Services (attach additional pages if necessary):

______________________________________________________________________________

______________________________________________________________________________

______________________________________________________________________________

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Please submit with this application:

1. Copy of a current and valid City business license.

2. Proof of general liability insurance, theft and property insurance, worker’s compensation
   insurance and motor vehicle insurance with the City as Hackensack named as additional insured,
   in accordance with the specifications outlined in Ordinance No. 46-2018, codified as Section 170-
   75B of the Code of the City of Hackensack (attached).

3. Fee of $250.00.

• Any modifications of terms of this permit application must be in accordance with the specifications
   outlined in Ordinance No. 46-2018 (attached).
• All valet parking operations shall be conducted in accordance with the requirements outlined in Ordinance
   No. 46-2018 (attached).
• Any valet parking operator or valet parking attendant violations will be subject to the penalties outlined in
   Ordinance No. 46-2018 (attached).

THIS APPLICATION IS ONLY FOR APPROVAL TO OPERATE A VALET PARKING
BUSINESS IN HACKENSACK. A SEPARATE APPLICATION IS REQUIRED FOR
APPROVAL OF EACH VALET PARKING PLAN.

_________________________ ______________________________________________
Date     Applicant

Permit renewals must be submitted in December for the following year.
APPLICANT’S AFFIDAVIT:

The undersigned applicant for a Valet Parking Operator Annual Permit hereby agrees that it will comply with all applicable laws, rules and regulations regarding valet parking. The undersigned further certifies that the applicant is not delinquent in the payment of any fees, taxes or assessments due the City of Hackensack.

The undersigned agrees that it will notify the City within ten (10) calendar days of any change in the information contained in this application.

The undersigned certifies he or she is an owner, officer, or partner principal of the applicant if the applicant is not an individual, or by the individual applicant for the valet parking service permit acknowledging that he/she has read the application, agrees to all of its terms and provisions, affirms the correctness and accuracy of the information given on the application and affirms he or she has the authority to bind the applicant to all of the terms, provisions, and requirements of the application.

Signature of Affiant:________________________________ Title:________________________
Printed Name of Affiant:___________________________ Date:_______________________

Subscribed and sworn before me this ___ day of ____________, 20__. (Witnessed or attested by)
My Commission expires:

____________________________
Seal

This application must be filed with the City Clerk’s Office. It will be reviewed and approved or denied by the City Manager within 30 days. Permit effective upon signing by City Manager.

_________________________ __________________________________________
Date     City Manager

Attached:
Valet Parking Operator Ownership Disclosure Certification
Ordinance No. #46-2018
**Valet Parking Operator Ownership Disclosure Certification**

☐ I certify that the list below contains the names and home addresses of all owners holding 10% or more of the issued and outstanding stock of the undersigned.

**Check the box that represents the type of business entity:**

☐ Partnership ☐ Corporation ☐ Sole Proprietorship ☐ Subchapter S Corporation

☐ Limited Partnership ☐ Limited Liability Corporation ☐ Limited Liability Partnership

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**Signature and Attestation:**
The undersigned is fully aware that if I have misrepresented in whole or part this affirmation and certification, I and/or the business entity, will be liable for any penalty permitted under law.

Name of Business Entity: __________________________________________________________

Signature of Affiant: ___________________________ Title: ___________________________

Printed Name of Affiant: ___________________________ Date: __________________________

Subscribed and sworn before me this ____ day of __________, 20__

(Witnessed or attested by) ___________________________

(My Commission expires: ___________________________

(Seal) ___________________________)