

Monday-Friday 8am-5pm

Administration & Regulatory Affairs Department 2020 McKinney, Houston, TX 77003 832.393.8690 – Office 832.393.8646 – Fax parking@houstontx.gov

## Valet Parking Service (VPS) Permit Application Instructions

Complete the application in its entirety and have it notarized. Separate, copy as necessary.

NOTE \* Each individual who is required to fill out a schedule H must submit himself/herself to be fingerprinted through MorphoTrust USA at one of their IdentoGo enrollment centers. Please contact ParkHouston for background check document.

| Submit the remainder of the application to the Parking Management division with the following   |
|---|
| applicable information: (Permits are assessed a \$29.18 Administration Fee)                     |
| ☐ Original indemnity release form signed by each principal and notarized (page 6)               |
| ☐ Non-Refundable Fee (cash, check, credit card or money order) payable to the City of Houston   |
| <ul> <li>\$1780.42 – First Time Applicant (\$1751.24 permit fee + \$29.18 admin fee)</li> </ul> |
| <ul> <li>\$904.80 - Renewals (\$875.62 permit fee + \$29.18 admin fee)</li> </ul>               |
| ☐ Original Assumed name certificate if the VPS will be operated under an assumed name           |
| □ Location of all existing and proposed valet zone locations where applicant and                |
| employees intend to provide valet parking services  |
| □ Name and mailing address of each principal of the applicant                                   |
| □ Partnership registration, if any  |
| □ Names and addresses of all general partners if applicant is a partnership                     |
| □ Certificate of good standing from the Texas Secretary of State for a domestic corporation     |
| ☐ For a foreign corporation, a Certificate of authority to do business in Texas along with the  |
| names and addresses of all officers and the registered agent.                                   |
| ☐ Copy of proof of insurance sent to our offices from your insurance agent. Proof must be       |
| provided on an Accord 25 form. The information can be faxed to 832-393-8646 or emailed to       |
| parking@houstontx.gov. Please refer to City of Houston Code of Ordinances for insurance         |
| requirements.   |

## Other Application Information

- Incomplete applications will not be processed.
- Only original documents will be accepted. No copies.
- Documents must have identical names and spellings.
- Documents containing alterations, erasures or outdated photos will not be accepted.
- Fraudulent documents will be confiscated.
- All fees are non-refundable.

Allow a minimum of 10 working days for processing. Parking Management may contact you for additional information or clarification while processing the application.

Please refer to the City of Houston's Code of Ordinances Chapter 26, Valet Parking Services for more detail, www.houstontx.gov/codes. **Outstanding parking citations must be cleared prior to permit issuance.** 



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# Valet Parking Service Permit Application

| 1.     | TYPE OF BUSINESS (Check One) □Pro   | oprietorship                | nership           | □Corporation               |
|--------|---|-----------------------------|-------------------|----------------------------|
| 2.     | Harris County DBA or Business Name: _   |                             |                   |                            |
| 3.     | Owner's Name:   |                             |                   |                            |
| 4.     | Business Address:   |                             |                   |                            |
| 5.     | Mailing Address   |                             |                   | Zip:                       |
| 6.     | Applicant Last Name:  |                             |                   |                            |
| 7.     | Business Phone:   |                             | Fax Number:_      |                            |
| 8.     | Federal Employee Identification #:  |                             | State Sale        | es Tax #:                  |
| 9.     | Corporate Charter Number:   |                             |                   |                            |
| 10.    | Email address:  |                             | TDL:              |                            |
| appl   | er penalties of perjury, I (print name)<br>ication and accompanying attachments, I agi<br>uracy of the information given on the applicati | ree to all of its terms an  | d provisions, I a | affirm the correctness and |
| all of | f the terms, provisions and requirements of the plete.  |                             |                   |                            |
|        | e of Texas<br>nty of Harris<br>. personally app   | eared before me. and b      |                   | Signature                  |
| _      | ed this application in the capacity designated ication and the statements therein contained   | d, if any, and further stat |                   |                            |
| SWC    | ORN TO AND SUBSCRIBED before me this  | day of                      | , A.D. 2          | 20                         |
| Nota   | ry Public in and for the State of Texas   |                             |                   |                            |
|        |   |                             | Notary            | y Public Signature         |



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# SCHEDULE H PERSONAL HISTORY OF BUSINESS OWNERS

| DL#  |  |
|------|--|
| DOB# |  |

**INSTRUCTIONS:** If you answered "proprietor" for item# 1 on the valet parking service application, fill out a Schedule H for yourself. For "partnerships", each partner must complete a separate Schedule H. For "corporations", each of the three principal officers of the corporation must complete a separate Schedule H.

Each individual who is required to fill out a schedule H must submit himself/herself to be fingerprinted with Fingerprint Applicant Services of Texas.

| Name                  |                                |                           |                       |                  |
|-----------------------|--------------------------------|---------------------------|-----------------------|------------------|
| Address               |                                | City                      | State                 | Zip              |
| Phone                 | Form of Busines                | S                         | % of Own              | nership Interest |
| DOB                   | Age                            | Place of Birth            |                       |                  |
| Social Security #     | cial Security#                 |                           | er's License #        |                  |
| Sex                   | Race Marita                    | Status                    | US Citizen: Yes       | No               |
| Weight                | Color of Hair                  |                           | Color of I            | -<br>Eyes        |
| Names  Date From – To | and addresses of each busin    | City                      | rated for preceding f | Zip Code         |
| Date From – To        | Street Address                 | City                      | State                 | Zip Code         |
| Date From – To        | Street Address                 | City                      | State                 | Zip Code         |
| Date From – To        | Street Address                 | City                      | State                 | Zip Code         |
| -                     | g out this form been convicted |                           | •                     |                  |
| prison in the precedi | ng seven (7) years? (Circle or | ne) Yes No                | If yes, provide       | the following:   |
| Offense convicted of  | F                              |                           |                       |                  |
| Date of conviction    |                                |                           |                       |                  |
| Place of conviction   |                                |                           |                       | <del> </del>     |
| Court and Case num    | nber                           |                           |                       |                  |
|                       | _                              | Page 1 of 2               | ~                     |                  |
|                       | Sc                             | hedule H (Valet Parking S | Services)             |                  |

DO NOT WRITE BELOW THIS LINE



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| MUNICIPAL COURTS (Warrant Check) 1400 Lubbock, 1st Floor |  |
|--|--|
|  |  |
|  |  |
|  |  |
|  |  |

Page 2 of 2 Schedule H (Valet Parking Services)



Named Insured and Mailing Address:

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## **INSURANCE FILING FORM**

This certifies the below named insured is provided commercial general liability general insurance, and auto liability insurance or garage liability insurance coverage with a company on the "List of Authorized Insurance companies" published by the Texas Department of Insurance (www.tdi.state.tx.us) that is authorized to sell auto liability insurance, or is a "County Mutual" identified with a code number; and has a 30-day cancellation endorsement to the City of Houston, Administration & Regulatory Affairs Department, Parking Management Division, 2020 McKinney, Houston, Texas 77003.

| Additional Insured (name of city pe   | rmit holder if different from above i   | named insured):   |                               |
|---|---|---|-------------------------------|
|   |   |   |                               |
|   |   |   |                               |
| Policy Period From:   | To:   |   |                               |
| Minimum Limits for Commercial G   | eneral Liability: Bodily Injury and   | Property  |                               |
| <ul> <li>Auto Liability Insurance and collision coverage f permittee: \$500,000 con</li> <li>Or garage liability insurance comprehensive and collisions.</li> </ul> | bility including broad form coverage of \$500,000 for each occurrence and e endorsed to include garage keeper for vehicle storage and coverage for abined single limit per accident. Tance endorsed to include garage keeper distinct coverage for vehicle storage at \$500,000 combined single limit per a | Il \$500,000 annual aggregate. It is legal liability including compound vehicle driven by or at direction epers legal liability insurance in the coverage for vehicle driven by | rehensive<br>n of<br>ncluding |
| Endorsements: TE-02—2A or (ISO)   | ) CA 02 44 06 04 30 Days  |   |                               |
| Name of Insurance Company   |   |   |                               |
| Address   |   |   |                               |
| Signed By:  |   |   |                               |
| (Authorized Underwriter)  | Policy Number   | Print name  | Phone                         |
|   |   |   |                               |

This is an official government record. A false entry may constitute a felony of the third degree



Signature of Applicant

### **ParkHouston**

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## INDEMNITY AND RELEASE FORM

The Permittee agrees to and shall defend, indemnify, and hold the City and its agents, employees, officers, and legal representatives, (collectively, the "city") harmless for all claims, causes of action, liabilities, fines, and expenses (including without limitation, attorneys' fees, court costs, and all other defense costs and interest) for injury, death, damage, or loss to persons or property sustained in connection with or incidental to any performance under this permit, including, without limitation, those caused by:

- 1. The Permittee's and/or its agents' employees', officers', directors', contractors', or subcontractors' (collectively in lettered paragraphs 1-3, "Permittee's") actual or alleged negligence or intentional acts or omissions;
- 2. The City's and the Permittee's actual or alleged concurrent negligence, whether the Permittee is immune from liability or not; and
- 3. The City's and the Permittee's actual or alleged strict products liability or strict statutory liability, whether the Permittee is immune from liability or not.

The Permittee shall defend, indemnify and hold the City harmless during the term of the permit and for two years after the permit expires. The Permittee's indemnification is limited to \$500,000.00 per occurrence.

The Permittee agrees to and shall release the City from all liability for injury, death, damage, or loss to persons or property sustained in connection with or incidental to performance under the permit, even if the injury, death, damage or loss is caused by the City's sole or concurrent negligence.

| application and affirms he has the authority to bind the applicant to all of the terms, provisions, and requirements of the application. |   |  |  |
|--|---|--|--|
| State of Texas   |   |  |  |
| County of Harris   |   |  |  |
| Before me, the undersigned authority, a Notary Public in and for the Sta   | te of Texas, on this day personally     |  |  |
|  | sworn, on his/her oath says that he/she |  |  |
| is the person who has this day signed this Indemnity and Release form a  | and the foregoing application for a     |  |  |
| permit to operate a Valet Parking Service in the City of Houston, he/she   | has read the application and indemnity  |  |  |
| and release form and that the statements contained therein are true  |   |  |  |
| <b>SWORN TO AND SUBSCRIBED</b> before me this day of   | , A.D. 20                               |  |  |
|  |   |  |  |
| Notary Public in and for the State of Texas  | Notary Public Signature                 |  |  |

\*The application shall be signed by 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 has read the

application, agrees to all of its terms and provisions, affirms the correctness and accuracy of the information given on the