

APPLICATION FOR CERTIFICATE OF AUTHORITY TO COLLECT PARKING TAXES FOR 2022

OFFICE USE ONLY:
BAN:
Date Received:

City and County of San Francisco
Office of the Treasurer & Tax Collector, Business Tax Section
P.O. Box 7425, San Francisco, CA 94120-7425

JOSÉ CISNEROS, TREASURER

APPLICANT		Parking [•]	Taxes for the C	ity and County of		cate of Authority I understand this		
INFORMATION	Name of Parking Operator	•		Business Name	9			
	Location of Parking Station			Business Account Number (BAN)				
	Mailing Address				Telephone No:			
					()			
	□ Sole Propri	etorshi	p (Individual, Trust,	Estate)				
PART A	Print Name of Ow	ner:						
BUSINESS	Residential Addre							
STRUCTURE								
Check box for type of	Tel. No.: ()							
business	Social Security #:							
	Social Security #.			_				
	□ Partnership	(General,	Limited Partnership, L	LP, LLC, joint Venture, As	sociation) Ownership r	nust total 100%		
	Title	%Ownersh	ip Name	Address	Tel No.	Social Security		
	General Partner	%			()			
	Partner	%			()			
	Partner	%			()			
	For more partners, send a	ttachment to	this application.					
	□ Corporation	1						
	Secretary of State	Corporat	e ID No.:		State:			
	List Corporate Officers & Stockholders: List all owners greater than 5%							
	Title % President/CEO	Ownersh %	ip Name	Address	Tel No.	Social Security		
	President/CEO	70			()			
	Chief Financial	%			()			
	Officer							
	Secretary	%			()			
continued on next	Other:	%			()			
page	(list title)				, ,			

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	Title %Ownership	Name	Address	Tel No.	Social Security		
	Director %			()			
	Director %			()			
	Director %			()			
				()			
BUSINESS	Shareholder %			()			
STRUCTURE	Shareholder %			()			
(continued)	Shareholder %			()			
PART B	Enter total number of parkin	a stations operat	ed by applicar	nt in San Franci	sco.		
PARKING			ou by applioui				
STATION	1. Business Name:						
INFORMATION	2. Location Address:						
For multiple	3. Block/Lot of location:_						
locations, make	4. Start Date of this locat						
copies of Part B, complete one copy	5. Do you own the land a	at this location?					
per location, and	□Yes, skip to	SECTION III	No, continue to	SECTION II			
attach to this	SECTION II – LEASEHOLD IN	NEODMATION - A	ttach a conv of	vour loseo saroo	mont		
application which will be incorporated	SECTION II - LEASEHOLD II	NFORWATION - A	itacii a copy oi j	your lease agree	ment.		
herewith.	6. Lessor Name:						
	7. Property Owner Name	·	-				
	Lessor Address:						
	9. Lease Dates: Beginn						
	10. Monthly Rent: \$ (Schedule monthly lease payment for 1/1/2022)						
	SECTION III – MANAGEMENT AGREEMENT INFORMATION – Attach a copy of your						
	management contract.	ner:					
	11. Name of Property Own12. Name of Property Mar						
	13. Contract dates: Begin						
	14. Terms of Compensation:						
	SECTION IV – TYPE OF PARKING STATION – Check all that apply						
	□ Garage	□ Attende		ervice Station			
	□ Surface Lot □ Unattended □ Other:						
	SECTION V – HOURS OF OP 15. Are you open 24 hours		?				
	· ·	o SECTION VI		te question 16 b	elow		
continued on next	,		, 1				
page							

PARKING						
STATION	16 List day	s and hour	s vour husines	es is onen:		
NFORMATION	16. List days and hours your business is open: Day Hours Open					
continued)	Sunday					
	Tueso	day				
	Wedne	Wednesday				
	Thursday Friday					
	Satur	day				
		e Police Per tes and loca	mit #:			
	Dates		·	Location of Parked Vehicles		
				THIS LOCATION		
	18. Total N	Monthly Coll	ections: \$	(average)		
	Complete the Rate type		\$ Charge	Explanation		
	Hourly		\$	<u> </u>		
	Daily		\$			
	Daily Monthly		\$	# of customers (avg):		
	Monthly		\$	# of customers (avg):		
	Monthly Discounte	Vehicles	\$ \$	# of customers (avg):		
	Monthly Discounte Oversized Lost Ticke	Vehicles	\$ \$ \$	# of customers (avg):		
	Monthly Discounte Oversized Lost Ticke Evening	Vehicles et	\$ \$ \$ \$	# of customers (avg):		
	Monthly Discounte Oversized Lost Ticke Evening Weekend:	Vehicles et	\$ \$ \$ \$	# of customers (avg):		
continued on next	Monthly Discounte Oversized Lost Ticke Evening	Vehicles et	\$ \$ \$ \$	# of customers (avg):		

SECTION VIII - PARKING CAPACITY - complete this section for this location PART B List the following: **PARKING** 19. Total number of parking stalls, marked and unmarked: STATION 20. Maximum number of parked vehicles capacity **INFORMATION** 21. Average number of daily turnover of parked vehicles: (continued) a) "turnover" is defined as the frequency that a parking space is occupied by a vehicle and is again occupied by another vehicle on that same day. b) for example, if maximum capacity at a parking location at any specific time is 100 vehicles, if total vehicles parked on a given day is 150, then 1.5 is the turnover factor on that given day. 22. Address of where you park overflow of vehicles: (if "overflow" exists and such movement of vehicle(s) is necessary) 23. Do you anticipate any substantial exempt vehicle patronage at this location during 2022? ☐ Yes If yes, please describe the source of such exempt vehicles 24. Name and contact information of other parking or valet operator sharing space at this location: Operator Name: Address: City/ST/Zip:_____ Tel. No.: () Rent paid to you (per month) SECTION IX - REVENUE CONTROL EQUIPMENT (RCE) REQUIREMENTS: Check Yes or No for each question relating to your parking station location. 25. Is there an operational RCE currently in use?..... ☐ Yes □ No 26. Is your RCE used to track all parking transactions?..... ☐ Yes □ No 27. At entry, does your RCE issue or track a unique ticket number?....□ Yes □ No 28. Does your RCE track space rented?..... Yes □ No 29. Does your RCE accept credit cards? Yes □ No 30. Does the RCE receipt as issued to a parking patron include: a. Time and date of entry?..... ☐ Yes □ No b. Time and date of exit?..... ☐ Yes □ No c. Total amount charged? ☐ Yes □ No d. Occupancy period? ☐ Yes □ No e. The unique transaction number? ☐ Yes □ No The parking station address? ☐ Yes □ No A valid address & phone number to handle complaints? Yes □ No continued on next page

32. Name of Bond Surety Company: 33. Annual Gross Parking Receipts: \$ for year: 34. Amount of Bond: \$ Premium Amount: \$ 35. Dates of Bond coverage: Beginning/ to Ending/_/ 36. Bond Number: SECTION XI - ONLINE PARKING RESERVATION AND/OR CAR SHARE Do you maintain now, or plan to gain or maintain any contractual relationships with any online parking reservation application and/or car sharing company? Yes			on on this location: plication:			
34. Amount of Bond: \$ Premium Amount: \$	32. N	lame of Bond Sur	ety Company:			
35. Dates of Bond coverage: Beginning/ to Ending// 36. Bond Number:	33. <i>A</i>	Annual Gross Park	king Receipts: \$		for year:	
SECTION XI – ONLINE PARKING RESERVATION AND/OR CAR SHARE Do you maintain now, or plan to gain or maintain any contractual relationships with any online parking reservation application and/or car sharing company? Yes	34. <i>A</i>	Amount of Bond: \$		_ Premium	Amount: \$	
SECTION XI - ONLINE PARKING RESERVATION AND/OR CAR SHARE Do you maintain now, or plan to gain or maintain any contractual relationships with any online parking reservation application and/or car sharing company? Yes	35. E	Dates of Bond cov	erage: Beginning	///	to Ending	//
Do you maintain now, or plan to gain or maintain any contractual relationships with any online parking reservation application and/or car sharing company? Yes	36. E	Bond Number:				
online parking reservation application and/or car sharing company? Yes	SECTIO	N XI – ONLINE PA	ARKING RESERVA	ΓΙΟΝ AND/O	R CAR SHARE	
online parking reservation application and/or car sharing company? Yes	Do you i	maintain now, or p	olan to gain or mainta	in any contra	actual relationship	os with any
Yes No If yes, please list such company names and relevant contact information below: Online reservation Car share	-		_	-		,
If yes, please list such company names and relevant contact information below: Online reservation Car share 1				,	. ,	
Online reservation Car share 1						
1	If yes	, please list such o	company names and	relevant con	tact information b	elow:
1				Onli	ine reconvetion	Carabara
2						
3	1				⊔	
4	2				_ □	
SECTION XII - VALET PARKING OPERATION Does your business conduct valet parking? Yes, complete below	3		· · · · · · · · · · · · · · · · · · ·		□	
SECTION XII - VALET PARKING OPERATION Does your business conduct valet parking? Yes, complete below No, skip to Part C Indicate where you park the vehicles: Fixed location at (address): Hotel Name Hotel Address: Location of where vehicles are parked: Restaurant Name Restaurant Address: Location of where vehicles are parked: Special Event for Name: Address of Event: Location of where vehicles are parked: Street parking at:	4				_ □	
Does your business conduct valet parking? ☐ Yes, complete below ☐ No, skip to Part C Indicate where you park the vehicles: ☐ Fixed location at (address): ☐ Hotel Name ☐ Hotel Address: ☐ Location of where vehicles are parked: ☐ Restaurant Name ☐ Restaurant Address: ☐ Location of where vehicles are parked: ☐ Special Event for Name: ☐ Address of Event: ☐ Location of where vehicles are parked: ☐ Street parking at: ☐ Street parking at:	5.				🗆	
Does your business conduct valet parking?						
□ No, skip to Part C Indicate where you park the vehicles: □ Fixed location at (address): □ Hotel Name □ Hotel Address: □ Location of where vehicles are parked: □ Restaurant Name □ Restaurant Address: □ Location of where vehicles are parked: □ Special Event for Name: □ Address of Event: □ Location of where vehicles are parked: □ Street parking at:	SECTIO	N XII - VALET PA	RKING OPERATION	1		
Indicate where you park the vehicles: Fixed location at (address): Hotel Name Hotel Address: Location of where vehicles are parked: Restaurant Name Restaurant Address: Location of where vehicles are parked: Special Event for Name: Address of Event: Location of where vehicles are parked: Street parking at:		ur business cond	duct valet parking?		•	
□ Fixed location at (address): □ Hotel Name Hotel Address: Location of where vehicles are parked: □ Restaurant Name Restaurant Address: Location of where vehicles are parked: □ Special Event for Name: Address of Event: Location of where vehicles are parked: □ Street parking at:	Does yo				o Port C	
 Hotel Name Hotel Address: Location of where vehicles are parked: □ Restaurant Name Restaurant Address: Location of where vehicles are parked: □ Special Event for Name: Address of Event: Location of where vehicles are parked: □ Street parking at: 			e vehicles:	□ No, skip t	o Fait C	
Hotel Address: Location of where vehicles are parked: Restaurant Name Restaurant Address: Location of where vehicles are parked: Special Event for Name: Address of Event: Location of where vehicles are parked: Street parking at:	Indicate	where you park th				
□ Restaurant Name	Indicate v	where you park th I location at _{(addres:}	s):	· · · · · · · · · · · · · · · · · · ·		
Restaurant Address:	Indicate v □ Fixed □ Hotel Hotel	where you park th I location at _{(address} Name Address:	s):			
Location of where vehicles are parked: Special Event for Name: Address of Event: Location of where vehicles are parked: Street parking at:	Indicate v □ Fixed □ Hotel Hotel Loca	where you park th I location at _{(address} I Name Address:tion of where vehice	cles are parked:			
□ Special Event for Name:	Indicate v Fixed Hotel Hotel Loca	where you park th I location at _{(address} I Name Address: tion of where vehicaurant Name	cles are parked:			
Address of Event: Location of where vehicles are parked: Street parking at:	Indicate v Fixed Hotel Hotel Loca Resta	where you park th I location at (address) Name tion of where vehicaurant Name	cles are parked:			
□ Street parking at:	Indicate v □ Fixed □ Hotel Hotel Loca □ Resta Resta Loca	where you park the location at (address) Name Address: tion of where vehical variant Address: aurant Address: tion of where vehical vehicles and the location of where vehicles are set to a location at the location at (address).	cles are parked:			
	Indicate v Fixed Hotel Hotel Loca Resta Resta Loca Addre	where you park the location at (address) Nametion of where vehicle aurant Address:tion of where vehicle along the location of where vehicles of Event:	cles are parked: cles are parked: e:			
visad an inaid	Indicate v □ Fixed □ Hotel Loca □ Resta Resta Loca □ Spec Addre Loca	where you park the location at (address) location at (address) location of where vehicle aurant Name location of where vehicle aurant Address: location of where vehicless of Event: location of where vehicless of where vehicles with the location of where vehicles where we want to be a supplied to the location of where vehicles where we want to be a supplied to the location at the location at the location at the location at (address) where we want to be a supplied to the location at (address) where we want to be a supplied to the location at (address) where we want to be a supplied to the location at (address) where we want to be a supplied to the location at (address) where we want to be a supplied to the location at (address) where we want to be a supplied to the location at (address) where we want to be a supplied to the location at (address) where we want to be a supplied to the location at (address) where we want to the location at (address) where we want to be a supplied to the location at (address) where we want to be a supplied to the location at (address) where we want to be a supplied to the location at (address) where we want to be a supplied to the location at (address) where we want to be a supplied to the location at (address) where we want to be a supplied to the location at (address) where we want to be a supplied to the location at (address) where we want to be a supplied to the location at (address) where we want to be a supplied to the location at (address) where we want to be a supplied to the location at (address) where we want to be a supplied to the location at (address) where we want to be a supplied to the location at (address) where we want to be a supplied to the location at (address).	cles are parked: cles are parked: e: cles are parked:			

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SECTION XIII - SUBLEASE INFORMATION
Do you sublease any portion of your parking station area?
☐ Yes, complete below and submit a copy of the sublease agreement.
□ No
36. Sub-Lessee Name:
37. Sub-Lessee Address:
38. Sub-Lease Dates: Beginning/ to Ending//
39. Total Rent: \$
40. Frequency of Rent: Monthly Annual Other:

Part C: Declaration of Responsibility

By signing this application form, I represent and acknowledge that I am the person, or authorized agent for this person, responsible for the operation of this parking station. I am responsible for the collection and/or remittance of the parking tax from the occupant and payment of those tax revenues to the Tax Collector. I am liable for all applicable tax, penalties, interest and fees, including but not limited to, the failure to collect and transmit the tax, for underreporting the tax, for failure to transmit the taxes to the Tax Collector, for any misrepresentations contained in this application, or for any other violations of applicable law regarding the operation of the location where parking occupancy occurs. Those penalties may include but are not limited to, suspension and/or revocation of the certificate. If any information included on this application should change, I agree to inform the Tax Collector of those changes within five (5) working days. I declare under penalty of perjury under the laws of the State of California that the foregoing is true and correct.							
Executed this	day of	, 202	, at				
	Signature		Print Your Name				
	Email		Title				