



## 2024 APPLICATION FOR RENEWAL OF PARKING CERTIFICATE OF AUTHORITY

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

CCSF-TTX-USE ONLY  
Date Received

**Renewal of Certificate of Authority (COA) to Collect 2024 Parking Taxes is due and must be postmarked no later than December 31, 2023 and submitted with a valid parking tax collection bond or continuation certificate for each parking station in operation. You may use this form to renew only if you have a valid 2023 COA issued by our office for each location subject to the renewal.**

<b>APPLICANT INFORMATION</b>	I, Applicant, am the parking operator and am renewing the issued Certificate of Authority to Collect Parking Taxes for the City and County of San Francisco. I understand this renewal application must be complete to be accepted for review.		
	Name of Parking Operator		Business Account Number (BAN)
	Business Name		Location Identicalton Number (LIN)
	Mailing Address		
	Telephone No.	City, State, ZIP	

<b>BUSINESS OWNERSHIP STRUCTURE</b>	<input type="checkbox"/> I certify there are no changes to the business structure or ownership as reported in the Certificate of Authority so filed last year. If there are any changes, do not use this form and instead complete a new 2024 COA initial application.  Please check if applicable.
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<b>PARKING STATION UPDATED INFORMATION</b>	List all the parking stations by street address for which you are renewing the Certificate of Authority. The street address must match the locations for which you are currently reporting. You must have a valid 2023 Certificate of Authority for each of the locations listed below.					
	Please complete all relevant information in the table below					
	Location Address	Rent as of 01/01/24	Lease initiation date	Lease end date	Lessor name	Property owner name
<b>If additional location information exists, please complete all further information in the identical format and attach to the renewal application</b>						

continued on next page

<b>SUBLEASE INFORMATION</b>	<p>Do you sublease any portion of your parking station area?</p> <p><input type="checkbox"/> Yes, complete below and submit a copy of the sublease agreement.</p> <p><input type="checkbox"/> No, skip to next section.</p> <p>1. Sub-Lessee Name: _____</p> <p>2. Sub-Lessee Address: _____</p> <p>3. Sub-Lease Dates: Beginning ___/___/___ to Ending ___/___/___</p> <p>4. Total Rent paid to you by sub-lessee: \$ _____</p> <p>5. Frequency of Rent: Monthly      Annual      Other: _____ (circle one)</p>																		
<b>VALET INFORMATION</b>	<p><b>Associated Hotel Valet Parking Operation</b></p> <p>Do any your business locations maintain any associated hotel valet parking? <input type="checkbox"/> Yes, complete below</p> <p><input type="checkbox"/> No, skip to next section.</p> <p>Indicate where you park the vehicles:</p> <p><input type="checkbox"/> Fixed location at (address): _____</p> <p><input type="checkbox"/> Hotel Name: _____</p> <p>Hotel Address: _____</p> <p>Location of where vehicles are parked: _____</p> <p>If more than one location, please attach additional page with such information</p>																		
<b>ONLINE PARKING RESERVATION AND CAR SHARE</b>	<p><b>ONLINE PARKING RESERVATION AND/OR CAR SHARE</b></p> <p>Do you maintain now, or plan to gain or maintain any contractual relationships with any online parking reservation application and/or car sharing company?</p> <p><input type="checkbox"/> Yes    <input type="checkbox"/> No</p> <p>If yes, please list such names and contact information below:</p> <table style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 80%;"></th> <th style="width: 10%; text-align: center;">Online reservation</th> <th style="width: 10%; text-align: center;">Car share</th> </tr> </thead> <tbody> <tr> <td>1. _____</td> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> </tr> <tr> <td>2. _____</td> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> </tr> <tr> <td>3. _____</td> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> </tr> <tr> <td>4. _____</td> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> </tr> <tr> <td>5. _____</td> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> </tr> </tbody> </table>		Online reservation	Car share	1. _____	<input type="checkbox"/>	<input type="checkbox"/>	2. _____	<input type="checkbox"/>	<input type="checkbox"/>	3. _____	<input type="checkbox"/>	<input type="checkbox"/>	4. _____	<input type="checkbox"/>	<input type="checkbox"/>	5. _____	<input type="checkbox"/>	<input type="checkbox"/>
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<b>OTHER BUSINESS INFORMATION</b>	<p>Are there any changes to the listed stations as reported in the Certificate of Authority so filed last year for the following?</p> <table style="width: 100%; border: none;"> <tr> <td></td> <td style="text-align: right;">Change</td> <td style="text-align: right;">No Change</td> </tr> <tr> <td>Type of parking station</td> <td style="text-align: right;"><input type="checkbox"/></td> <td></td> </tr> <tr> <td>Hours of operation</td> <td></td> <td></td> </tr> <tr> <td>Special event information</td> <td></td> <td></td> </tr> <tr> <td>Parking capacity</td> <td></td> <td></td> </tr> <tr> <td>Revenue control equipment requirements</td> <td style="text-align: right;"><input type="checkbox"/></td> <td></td> </tr> <tr> <td>Valet parking information</td> <td style="text-align: right;"><input type="checkbox"/></td> <td></td> </tr> </table> <p>If any changes exist to any parking station, please provide all relevant details concerning all within the update form for each location.</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 25%;">Location address</th> <th style="width: 25%;">Type of change</th> <th style="width: 25%;">Date of change</th> <th style="width: 25%;">Detail of change(s)</th> </tr> </thead> <tbody> <tr><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td></tr> </tbody> </table> <p><b>If additional location information exists, please complete all further information in the identical format and attach to the renewal application</b></p>		Change	No Change	Type of parking station	<input type="checkbox"/>		Hours of operation			Special event information			Parking capacity			Revenue control equipment requirements	<input type="checkbox"/>		Valet parking information	<input type="checkbox"/>		Location address	Type of change	Date of change	Detail of change(s)																																								
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**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

\_\_\_\_\_  
Title

\_\_\_\_\_  
E-mail