

City of Los Angeles, Department of Transportation
Parking Meters Division
555 Ramirez St, Space #315
Los Angeles, CA 90012
(213) 473-8270



Valet Zone Application

BUSINESS OWNER INFORMATION	
Business contact name:	Title:
Business contact cell. #:	
Business contact e-mail address:	
Name of Business:	Business tel. #:
Business address:	City: State: Zip:
Seating capacity of business:	
Business Hours of Operation:	
Days: From: To:	
Hours: From: To:	
Briefly explain the reason for this valet zone request:	
Is the address of the business being served the same as	the address of the proposed valet zone?
Yes	No
VALET PARKING OPERATOR (VPO) INFORMATION	
VPO Business name:	
VPO Business name: VPO contact name:	
	Title:
VPO contact name:	Title: VPO cell. #:

LADOT VALET ZONES

PROPOSED VALET ZONE			
Is a new passenger loading zone required? Yes	s No		
Proposed Valet Zone loading address (if different	ent from business client address)	:	
C	City: State:	Zip:	
Number of spaces requested (minimum of 2):			
Meter IDs of requested spaces:			
Is an adjacent Passenger Loading Zone existing	g on the same block?		
	Yes No		
PROPOSED VALET ZONE HOURS OF OPERATION	DN (No Partial hours, please speci	fy AM/PM)	
Requested days: From:	To:		
Requested hours: From::00	To: :00		
PARKING FACILITY			
Lot/Garage contact name:	Tel. #:		
Lot/Garage address:	City:	State: Zip: _	
Lot/Garage capacity: # of reserved s	spaces for this valet zone:		
			
		- 	
REQUIRED ADDITIONAL DOCUMENTS (Please	initial upon completion of task)		INITIAL
REQUIRED ADDITIONAL DOCUMENTS (Please Attached copy of a contract between the serve			INITIAL
	ed business and valet parking ope	erator	INITIAL
Attached copy of a contract between the serve	ed business and valet parking ope	erator	INITIAL
Attached copy of a contract between the serve	ed business and valet parking oper parking operator and the storage lication review	erator	INITIAL

LADOT VALET ZONES

The purpose of this application is to pro	ovide the LADOT Parking Meters Division	on with the information needed to
process your request. By signing below	, the applicant attests that all informat	ion provided on the application is
accurate and true to the best of their k	nowledge. In addition, the applicant ac	knowledges that a submission of an
application does not give them permiss	sion to use any portion of a public stree	et as a valet zone. An LADOT engineer-
approved valet zone designation is requ	uired before a valet operator may use t	the designated zone on the approved
days and time. The applicant also agree	es to abide by all rules and regulations	as stated in The City of Los Angeles
Valet Ordinance No. 182742 if approve	d.	
		
Printed name of Applicant	Signature of Applicant	Date
Printed name of Applicant	Signature of Applicant	Date
Printed name of Applicant For LADOT Use Only	Signature of Applicant	Date
For LADOT Use Only	Signature of Applicant	
	Signature of Applicant	Date Date
For LADOT Use Only	Signature of Applicant	
For LADOT Use Only Application Reviewed By	Signature of Applicant	Date
For LADOT Use Only Application Reviewed By	Signature of Applicant	Date
For LADOT Use Only Application Reviewed By Application Assigned To	Signature of Applicant	Date
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For LADOT Use Only Application Reviewed By Application Assigned To	Signature of Applicant	Date

JK: Valet Ordinance / Online Application / DOT Valet Zone Application (PMZ)

Rev. 06/15/2021