REQUIREMENTS FOR VALET OPERATING LICENSES

Requests for the use of City of Austin Right Of Way, including requests to operate as a licensed valet service provider, must be authorized by the Austin Transportation Department. Enclosed in this packet is a link to the City Code pertaining to these permits and additional helpful information. If *after* reading through this packet you have any questions or need additional information, please contact us at 512-974-1150 or visit our office:

City of Austin, Transportation Department Right Of Way Management Division

3701 Lake Austin Blvd., Austin, TX 78703

Walk-in Hours – Monday through Friday, 8 a.m. to 1 p.m.

If you wish to serve as a valet operator in the right of way, this is the permit you will need. If you wish to valet from private property, contact the Development Assistance Center (DAC).

STEPS TO OBTAIN A VALET OPERATING LICENSE

- 1. Read and closely review the City of Austin valet ordinance and valet rules.
- 2. Submit required documentation to Right of Way Management.
- **3.** An Officer/Member of the Valet Operator business must participate in an **in-person meeting with Enforcement** and **Permitting staff** to discuss valet operational requirements.
- 4. Pay the annual fees. Valet Operator License can then be activated by Right of Way Management.

STEP 1 -VALET ORDINANCE AND VALET RULES

Please familiarize yourself with both the City of Austin ordinance AND rules that govern valet operations.

STEP 2 – DOCUMENATION

Right of way Valet Operators must submit the following **documents**:

- 1. The completed Application for Valet Operator (SEE PAGES 3-4 OF PACKET)
- 2. A copy of training materials/instruction provided to the employees of the Operator
 - Materials must incorporate the City of Austin valet ordinance and valet rules SEE "STEP 1- VALET ORDINANCE AND VALET RULES"
- 3. Photos, front and back, of the Operator's retroreflective outerwear
- 4. Photos of any booths, stands, or signage that will be placed in the right of way
 - If operating at a permanent valet zone, also include a rendering of where the aforementioned items would be placed
- 5. An outline of the procedure used for vehicle key custody
- 6. An outline of the procedure used for valet tags and identification
- 7. A copy of the valet tag, front and back
- 8. A Resolution of Authority (SEE PAGES 6-8 OF PACKET)
- 9. An Authorized Agent Form (SEE PAGE 5 OF PACKET)
- 10. Certificate of Insurance
 - o General Liability Insurance set at \$500,000 per occurrence minimum
 - o In lieu of General Liability, Operator may provide Garage Liability
 - o Evidence of a 30 Day Notice of Cancellation
 - City of Austin as Additional Insured
 - "City of Austin, Attn: Right of Way Mgmt, P.O. Box 1088, Austin, TX 78767" as Certificate Holder
 - **FOR A <u>DETAILED BREAKDOWN</u> OF INSURANCE REQUIREMENTS PLEASE REQUEST A COPY OF THE "REQUIREMENTS FOR INSURANCE, BOND, AND LICENSE" PACKET.**

STEP 3 - MEETING

Once the required documentation is reviewed and accepted, Right of Way Management will coordinate the scheduling of an **in-person meeting between the Operator**, **Parking Enterprise**, **and Right of Way Management**. Parking Enterprise is responsible for enforcement and regulation of all valet related activities. Right of Way Management is responsible for permitting of all valet related activities. Valet Operators must meet with representatives of these two divisions to discuss their operations. Points that will be reviewed include:

- 1. Duties of a Licensed Valet Operator
- 2. Valet permitting procedures
- 3. Enforcement and violation procedures
- 4. Vehicle handling restrictions

NOTE: THE TIME NEEDED TO COORDINATE THE MEETING BETWEEN THE OPERATOR, ENFORCEMENT, AND PERMITTING STAFF CAN VARY.

VALET FEE SCHEDULE

VALETTEE SCHEDOLE	_
Valet Operator License	
Application Fee	\$50.00/annually
Operating Fee (assessed per Permanent Zone)	\$10.00/annually
Valet Zone – Permanent	
Application Fee	\$150.00/annually
Space Fee	\$0.60/space/hour/annually
Signage Installation Fee - Small	\$250 each
Signage Installation Fee - Large	\$300 each
Valet Zone - Temporary	
Space Fee	\$50 per space; 3 space minimum
Operator License and Permanent Zone are valid for one year from date of issuance	

CITY CODE

For information about City Ordinances, Standard Details, Transportation Criteria Manual, etc. go to https://www.municode.com/library/tx/austin. For valet requirements, reference "Chapter 13-5. – Valet Parking Services".

Application for Valet Operator PERMIT HOLDER INFORMATION: The Valet Operator listed here will be the License Holder of record. Changes related to the Valet Operator will affect the License and should be relayed promptly to Right of Way Management staff. **Operator Contact Information:** Operating/Assumed Name(s) ____ Legal Name(s) (if different than Operating Name) Primary Contact Name _____ 24 Hour Emergency Number _____ Alternative Phone Number _ Mailing Address City State Zip Email Address **Operator Insurance:** Insurance Expiration Date _____ Lists City of Austin as Additional Insured ☐ Yes ☐ No Provides a 30 Day Notice of Cancellation ☐ Yes ☐ No **Provide a current copy of Insurance as evidence that requirements are satisfied, if not already on file.** **Operator Structure:** ☐ Sole Proprietorship/Single Membership ☐ Partnership ☐ Corporation ☐ Limited Liability Company **Provide a Resolution of Authority that corresponds with the Business Structure. If structure is Sole Proprietorship or Single Membership, provide business documentation as filed with the State and County. See pages 6-8 of this packet for additional details.** **SERVICE LOCATIONS: LOCATION #1:** Start Date of Service ______ Business Name _ Business Physical Address **LOCATION #2:** Start Date of Service _____ Business Name _____ Business Physical Address ___ **LOCATION #3:** Start Date of Service _____ Business Name ____ Business Physical Address _____ **LOCATION #4:**

Start Date of Service _____ Business Name ____

Business Physical Address

LOCATION #5:	
Start Date of Service	Business Name
Business Physical Address	
LOCATION #6:	
Start Date of Service	Business Name
Business Physical Address	
LOCATION #7:	
Start Date of Service	Business Name
LOCATION #8:	
Start Date of Service	Business Name
Business Physical Address	
LOCATION #9:	
Start Date of Service	Business Name
LOCATION #10:	
Start Date of Service	Business Name
I certify that each employ received a manual and to a material outerwear while I certify that loading or of location. I declare that the information processes a mended by Ordinance and the City Code. I understand order for this application to be opprovide the additional information.	each statement below by providing your initials in the adjacent box. yee of the License Holder has a driver's license valid in the State of Texas, and has raining instructing the employee in the local and state laws governing valet parking. of the License Holder who engage in valet parking vehicles will wear retro-reflective working during the nighttime, as approved by the director. Iffloading of customers from vehicles will occur only in the designated area at each service ovided in this application is true and that I have read the Code of the City of Austin Section in Number 031211-11, and I understand all conditions of this application as set forth hereing that no guarantee of approval is implied by the acceptance of this application, and that in completed the applicant must provide all additional information requested and that failure to on will result in denial of the application. I also understand that the City is not responsible incurred by me if the application is denied.
PRINT NAME COUNTY OF STATE OF TEXAS SWORN TO AND SUBSCRIBED E	SIGNATURE OF OPERATOR (MUST SIGN IN PRESENCE OF NOTARY) BEFORE ME ON THE DAY OF, NOTARY PUBLIC SIGNATURE
	NOTALL LODGIO DIGINATURE

AUTHORIZED AGENT FORM				
I,				
Persons named below are authorized and approved to submit permit application data and to obtain any right of way permits in regards to a License Valet Operations:				
AGENT 1 First & Last Name:				
Company Name: Phone #:				
Email Address: AGENT 2 First & Last Name:				
Company Name: Phone #:				
Email Address:				
Company Name: Phone #:				
I, the undersigned, representing the Licensed Valet Operator, do hereby affirm and swear, under oath, that all information on this form and on accompanying documents are true and correct.				
STATE OF TEXAS COUNTY OF SIGNATURE OF SOLE PROPRIETOR, MEMBER or PRINCIPAL (MUST SIGN IN PRESENCE OF NOTARY)				
SWORN TO AND SUBSCRIBED BEFORE ME ON THE DAY OF,				

NOTARY PUBLIC SIGNATURE

RESOLUTION OF AUTHORITY				
☐ Sole Proprietorship/Single Membership				
Please provide the applicable form of Documentation in Lieu of a Resolution of Authority Assumed Name Certificate, Certificate of Formation, Articles of Incorporation as filed with the State and County.				
☐ Partnership				
Resolution of Corporate Authority as General Partner				
I, the undersigned				
{print name of officer not signing the Permit Application or Authorized A	gent Form},			
ofthe "	Corporation", hereby certify that:			
{title}	{name of corporation}			
Corporation is duly organized and existing under the laws of the State o	f The following is a true			
and accurate transcript of a Resolution adopted at the	{date} Board meeting. The			
Corporation's Board of Directors adopted the Resolution, which is conta	ined in Corporation's minute book, at a duly			
authorized board meeting. A quorum of Corporation's Board of Director	s was present at the entire board meeting and all			
actions taken at the meeting complied with Corporation's charter and by	-laws. The Resolution has not been amended or			
revoked on the date signed below, and remains in full force and effect.				
Resolved, that				
{print name of officer signing the Permit Application or Authorized Ager	nt Form},			
{{title}} of{{na	ame of corporation}, is empowered to sign any and			
all documents and to take such steps, and to do such other acts and thin	ngs on behalf of said Corporation, acting in its			
capacity as General Partner of, a	Limited Partnership, as in			
{name of Partnership}	{state}			
his/her [Strike one] judgment may be necessary, appropriate or desira	able in connection with any related Permit			
submittal entered into or with the City of Austin				
Signed and sealed on, 20				
{Seal}				
	{Signature of officer named at top of form}			
	, ,			
	{Title}			

RESOLUTION OF AUTHORITY ☐ Corporation **Resolution of Corporate Authority** {print name of officer **not** signing the Permit Application or Authorized Agent Form}, the undersigned _____ of ____ {name of corporation} {title} the "Corporation", hereby certify that: Corporation is duly organized and existing under the laws of the State of ______. The following is a true and accurate transcript of a Resolution adopted at the ______ {date} Board meeting. The Corporation's Board of Directors adopted the Resolution, which is contained in Corporation's minute book, at a duly authorized board meeting. A quorum of Corporation's Board of Directors was present at the entire board meeting and all actions taken at the meeting complied with Corporation's charter and by-laws. The Resolution has not been amended or revoked on the date signed below, and remains in full force and effect. Resolved, that _____ {print name of officer signing the Permit Application or Authorized Agent Form} _of _______, {name of corporation} {title} is empowered to sign any and all documents on behalf of said Corporation. Date ______, 20____. {Company Seal} IF AVAILABLE {Signature of officer named at top of form}

{Title}

RESOLUTION OF AUTHORITY				
☐ Limited Liability Company Resolution of Corporate Authority for a Limited Liability Company				
contained in Company's mentire meeting and all act not been amended or revo	ninute book, at a duly authorized meeting complied with oked on the date signed below, and remain a sprint	Company's Members adopted the Resolution, which is g. A quorum of Company's Members was present at the a Company's charter and by-laws. The Resolution has ains in full force and effect. name of officer signing the Permit Application or		
empowered to sig said Company, as	{title} of In any and all documents, to take such s	{name of Company}, is teps, and to do such other acts and things, on behalf of e necessary, appropriate or desirable in connection with		
Signed and sealed on {Seal}		Signature of Member named at top of form}		

{Title}