

INSTRUCTIONS VALET SERVICE

Phone: 216.664.2260

Hours of Operation 8am to 5pm Weekdays

DALTax Compliance @city.cleveland.oh. us

When do you need a Valet Service License?

Codified Ordinance §463.02 (a) states, "no person shall engage in the business of providing a valet service within the City unless and until licensed in accordance with this chapter."

What to bring or submit to the Division of Assessments and Licenses

- Completed and signed application.
- Current, complete, and satisfactory Certificate of Insurance. The City of Cleveland must be named as additional insured and provide commercial general liability insurance for an amount not less than \$500,000.
- Samples of the customer receipt and/or hang tag that will be placed on the rear view mirror or set on the dashboard while parked.
- List of all valet zone locations, lots/garages utilized and other pertinent information on page two of this application.
- Fee of \$55.00. Fees are payable by cash, check, or credit card. Make all checks payable to the City of Cleveland.

How to obtain and/or submit a Valet Service License application

In Person or By Mail:

City of Cleveland Division of Assessments and Licenses 601 Lakeside Ave., Room 122 Cleveland, OH 44114

Online:

If you have any questions please call Bernard Butler at 216-664-2260, Mon-Fri 8am-5pm

City of Cleveland employees may not provide legal advice to the public. The information provided is for informational purposes only and is not legal advice. For questions regarding the application of a city ordinance or regulation, you should consult an attorney regarding your specific situation.



VALET SERVICE LICENSE APPLICATION

Phone: 216.664.2260	Hours of Operation: 8am to 5pm Weekdays	DALTaxCompliance@city.cleveland.oh.us
Fee: \$55.00	Application 1	Date:

PART I

SECTION A - VALET SERVICE INFORMATION	
Federal EIN	
Legal Name	
DBA Name	
Business Address	
City, State, Zip	
Phone	Email

SECTION B - CORPORATION INFORMATION					
Are parking spaces being made available pursuant to a written contract with a parking facility operator? (If yes, additional forms need to be completed, see Sect. D below) Yes No					No
Print names of officers, key personnel and all interested parties.					
President Vice President					
General Partner Limited Partner					
General Partner Limited Partner					
State Incorporated	Other Personnel				

SECTION C – RESPONSIBLE OFFICER INFORMATION (PRINT)			
Name			
Address			
City, State, Zip			
SSN			
Phone	Email		

RESPONSIBLE OFFICER SIGNATURE				
SIGN				
DATE				

SECTION D - ADDITIONAL INFORMATION

- Attach a current, complete, and satisfactory Certificate of Insurance. The City of Cleveland must be named as additional insured and provide commercial general liability insurance not less than \$500,000.
- Attach samples of the customer receipt and/or hang tag issued.
- C.O.§463.02(b) Valet License Fee \$55.00 per calendar year which expires on December 31st of the year issued.
- List all lots/garages, zones and other pertinent information on page two of this application.
- If you answered YES in Section B please call 216-664-2260 to obtain additional forms needed



VALET SERVICE LICENSE APPLICATION CODIFIED ORD. §463.02(B)

CITY OF CLEVELAND DEPARTMENT OF FINANCE

Division of Assessments & Licenses 601 Lakeside Avenue, Room 122 Cleveland, Ohio 44114

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PART II				
Location of Valet Zone Name, Address	Legal Name of the Parking Facility Utilized for Vehicle Storage, Facility Address, Contract Term	Parking Place License Number	Description - Total Spaces Days of Operation	Price to Patrons
Jimmy's Restaurant 123 Main St Cleveland	XYZ Parking Systems 321 Third St Cleveland Term = 8/2009 – 12/2009	LUFUXX-XXXXX	1 st floor – 100 spaces Mon-Fri & special events	\$10 M-TH \$20 F-SUN