Parking Lot Facility Use Application

City of Santa Barbara
Waterfront Parking Division
P.O. Box 1990, Santa Barbara, CA 93102-1990
Phone: (805) 897-1965 Fax: (805) 560-7580
www.SantaBarbaraCa.gov

Requested Date(s):

Time Requested:

Customer Information (Fill In Shaded Areas)

Applicant's Name

Organization

Mailing Address

City/State

Zip-code

Day Phone

Evening Phone

Cellular Phone

Fax / E-mail

Parking Lot

Spaces Required

Event Description

Number of Guests

Deposit Collected Amt.

PKG Fee Collected Amt.

Application Agreement: Applicant hereby agrees to comply with all City and State laws, rules, and regulations and to hold harmless, defend and indemnify the City of Santa Barbara, its officers, employees, and agents for any loss, damage, liability, cost or expense arising from the use or occupation of the facility relating to this application. I have received and read my copy of the rules and regulations pertaining to the facility use and am familiar with them. I agree to have my copy of this permit available for inspection on the day(s) of my event.

Applicant Signature

Application Date

FOR OFFICIAL CITY USE ONLY

to calculate

Total Space Use: total days X # parking space(s) = 0 **total # parking space(s)**

Total Fee Due: total # parking space(s) X $ Amt. per Space = $0.00 **Total Fee Due**

Reserved Parking

Re-fundable Deposit Fee

$300 Check Deposit for All Catered Events.

Comments: You are paying for parking spaces only, no electricity or water hookups are included.
No staking in the parking lot allowed. Any damage to City facilities and/or parking lot property is the responsibility of the event sponsor.

Deposit Fee Amt.

Supervisor's Approval

Date

Clear From

FRMP101(rev 6/12/03)