



CITY OF SOMERVILLE, MASSACHUSETTS
TRAFFIC AND PARKING DEPARTMENT

JOSEPH A. CURTATONE
MAYOR

SUZANNE RINFRET
DIRECTOR

City of Somerville Valet Parking Permit Application

DATE _____

(Issued July 1 to June 30 and must be renewed annually)

Applicant Information (location where valet operation is proposed, a location may include more than one street provided that it is contiguous)

1. Business Name _____

2. Address: Street _____

City: _____ Zip Code: _____

3. Owner/General Manager _____

Day Phone # _____ Email _____ Evening Phone # _____

Valet Information

1. Valet Company _____

2. Address: Street _____

City: _____ Zip Code: _____

3. Owner/General Manager _____

Day Phone # _____ Email _____ Evening Phone # _____

4. Valet Zone Location _____

Linear Feet/Marked Space/Meter Number _____

5. Off-Street Facility to be utilized (Name and address of facility)

6. For the Applicable Days and Hours of the Valet Operation, please list the Estimated Number of Vehicles during the Time Period and the Estimated Number of Valet Attendants that will be assigned during those periods.

Daytime Monday to Friday:



133 HOLLAND STREET, SOMERVILLE, MASSACHUSETTS 02144
(617) 625-6600 EXT. 7900 • TTY: (866) 808-4851 • FAX: (617) 628-6675
EMAIL: traffic@somervillema.gov • www.parksomerville.com



(HOURS) (# OF VEHICLES) (# OF ATTENDANTS)

Daytime Saturday and Sunday:

(HOURS) (# OF VEHICLES) (# OF ATTENDANTS)

Evenings Sunday to Wednesday:

(HOURS) (# OF VEHICLES) (# OF ATTENDANTS)

Evenings Thursday to Saturday:

(HOURS) (# OF VEHICLES) (# OF ATTENDANTS)

Required Attachments

Please identify by name and street address and attach a map or plan and a description showing the proposed route that valet parking staff will use to and from the off-street parking facility.

Please attach a copy of the agreement between the valet company or the establishment with the owner or operator of an approved off-street parking facility where the valet vehicles will be parked. Said agreement must include the following information: the total number of parking spaces in said facility; and the total number of parking spaces available for use by valet parked vehicles from the establishment.

Sign below & submit to City of Somerville Traffic and Parking Department Attention: Traffic Commission 133 Holland Street Somerville MA 02143 617.625.6600 extension 7900

SIGNATURE OF APPLICANT

Print name: _____

Phone number: _____

Email: _____



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