

Resident Information:			
Name:			
Address:			
Phone:			
Valet Company Information:  Company Name: Company Address: Company Contact Person: Company Phone Number:  Date of Event: , 20  Location Where Vehicles Will Be Parked:  Number of Vehicles:  List any special requirements:  Other Comments about the Permit:  Parking plan must be submitted with application for approval.  I understand that all activities permitted in the Town of Golden Beach will be subject to the governance of Ordinances enacted by the Town Council.			
		Name/Title of Person Completing Application	
		Approved/Town Manager or Designee	
		Approved/Chief of Police or Designee	Date
		Additional Information:	_