



# PARKING USE PERMIT APPLICATION

All applications and submittal requirements must be discussed with a planner at the Permit Services Center (633 E. Broadway, Rm. 101) prior to submittal. After you have completed your application packet and are ready to submit it, schedule an appointment with your contact planner (as noted on the Application Instructions). A case planner will be assigned after the application is officially submitted.

**FOR STAFF USE ONLY**

- EIF/EIR on file, Case No. \_\_\_\_\_ Date \_\_\_\_\_
- Previous EIF/EAF/EIR applicable No. \_\_\_\_\_ (mins. attached)
- Project Exempt (forms attached) Initials \_\_\_\_\_

CASE NO. \_\_\_\_\_  
DATE \_\_\_\_\_

Please PRINT or TYPE all information

### PART 1 – PROPERTY INFORMATION

- A. Address of property requesting off-site parking \_\_\_\_\_
- B. Nearest cross streets \_\_\_\_\_
- C. Zone(s) / District(s) \_\_\_\_\_
- D. Legal description of the property \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

### PART 2 – APPLICANT INFORMATION

- A. \_\_\_\_\_  
(First Name) (Last Name)
- B. \_\_\_\_\_  
(Street Address) (City) (State) (Zip Code) (Area Code - Phone Number)
- C. Check one box -  Architect  Builder/Developer  Consultant  Owner  Other \_\_\_\_\_

### PART 3 – OFF-SITE PARKING PROPERTY/BUSINESS INFORMATION

- A. Address of off-site parking \_\_\_\_\_
- B. Nearest cross streets \_\_\_\_\_
- C. Zone(s) / District(s) \_\_\_\_\_
- D. Legal description of the property \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
- E. Owner \_\_\_\_\_  
Address \_\_\_\_\_  
Phone \_\_\_\_\_
- F. Master Lessor \_\_\_\_\_  
Address \_\_\_\_\_  
Phone \_\_\_\_\_  
Key Contact Person \_\_\_\_\_
- G. Name of businesses currently using the same off-site parking lot \_\_\_\_\_  
Address \_\_\_\_\_  
Use by formal written agreement?  Yes  No  
Hours of business \_\_\_\_\_  
Number of parking spaces used \_\_\_\_\_

**PART 4 – FINDINGS OF FACT (per Glendale Municipal Code Title 30, Chapter 30.51.040)**

**A parking use permit shall be granted only if the reviewing authority makes the following findings of fact.**

**A. FOR OFF-SITE PARKING AND SHARED PARKING**

1. Is the off-site parking a permitted or conditionally permitted use in this zone?  Yes  No  
Does it comply with all of the applicable provisions of the Zoning Ordinance?  Yes  No  
If no, explain how it does not comply \_\_\_\_\_  
\_\_\_\_\_
2. Are the off-site parking spaces located within 1,000 feet (measured from the primary door entrance of the subject site, to the closest pedestrian access to the off-site parking)?  
 Yes, \_\_\_\_\_ feet  No, \_\_\_\_\_ feet
3. Is there a current or tentative parking lot lease/covenant?  Yes, date signed \_\_\_\_\_  No  
Total lease term \_\_\_\_\_ Total years remaining on lease term \_\_\_\_\_  
(Provide a copy of the lease or covenant agreement and note that the term shall not be less than 90 days)
4. Explain how the off-site parking will be available to the use, and that no substantial conflict will exist in the principal hours or periods of peak parking demands of any uses which are proposed to share the parking.  
Business hours (proposed use) \_\_\_\_\_ Business hours (off-site parking) \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
5. Explain how access to the site is adequate to accommodate the proposed off-site parking and any resulting excess traffic to the facility. \_\_\_\_\_  
\_\_\_\_\_
6. Explain how the design, location, size and operating characteristics of the proposed off-site parking are compatible with the existing and future land uses on-site and in the vicinity of the subject property. \_\_\_\_\_  
\_\_\_\_\_
7. How does the establishment, maintenance, or operation of the proposed parking at the proposed location not endanger, jeopardize, or otherwise constitute a nuisance to persons residing or working in the neighborhood of the proposed parking lot or structure? \_\_\_\_\_  
\_\_\_\_\_
8. How are off-site parking spaces in close proximity to residential uses designed and operated to comply with the City's noise requirements in Chapter 8.36 of the Municipal Code? \_\_\_\_\_  
\_\_\_\_\_
9. Is valet parking proposed?  Yes  No  
If yes, where will it be located? \_\_\_\_\_  
If yes, please attach a map of the valet route  
If yes, how will the proposed valet parking not generate excessive traffic on surrounding public streets and not utilize any residential street? \_\_\_\_\_  
\_\_\_\_\_
10. For shared parking, explain how different peak hour parking demands exist between the separate uses or how a single trip is likely to be made to two or more of the businesses proposed to share the parking, and for each use, provide the number of spaces required by each land use on an hourly basis between 6 am and 12 midnight for a typical weekday and a Saturday \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**B. FOR A COMMERCIAL PARKING FACILITY**

1. How is access to the site adequate to accommodate the proposed parking use and the traffic that the facility would reasonably be expected to generate?
2. Explain how the design, location, size and operating characteristics of the proposed off-site parking are compatible with the existing and future land uses on-site and in the vicinity of the subject property. \_\_\_\_\_  
\_\_\_\_\_
3. How does the establishment, maintenance, or operation of the proposed parking at the proposed location not endanger, jeopardize, or otherwise constitute a nuisance to persons residing or working in the neighborhood of the proposed parking lot or structure? \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
4. How are off-site parking spaces in close proximity to residential uses designed and operated to comply with the City's noise requirements in Chapter 8.36 of the Municipal Code? \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
5. Is valet parking proposed?  Yes  No  
If yes, how will the proposed valet parking not generate excessive traffic on surrounding public streets and not utilize any residential street? \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**C. FOR OFF-SITE LOADING FOR VEHICLE DEALERSHIPS**

1. Is the off-site loading located on an approved parking lot or structure?  Yes  No
2. Is there a current or tentative parking lot lease/covenant?  Yes, date signed \_\_\_\_\_  No  
(Provide a copy of the lease or covenant agreement and note that the term shall not be less than 90 days)
3. Explain how access to the site is adequate to accommodate the proposed off-site parking and any resulting excess traffic to the facility. \_\_\_\_\_  
\_\_\_\_\_
4. Explain how the design, location, size and operating characteristics of the proposed off-site parking are compatible with the existing and future land uses on-site and in the vicinity of the subject property. \_\_\_\_\_  
\_\_\_\_\_
5. How does the establishment, maintenance, or operation of the proposed parking at the proposed location not endanger, jeopardize, or otherwise constitute a nuisance to persons residing or working in the neighborhood of the proposed parking lot or structure? \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
6. How are off-site loading spaces in close proximity to residential uses designed and operated to comply with the City's noise requirements in Chapter 8.36 of the Municipal Code? \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Note: Failure to furnish the above information will delay action on the request. Three (3) copies of this application are to be submitted.**

**ALL PROPERTY OWNERS MUST SIGN THIS APPLICATION:**

1. \_\_\_\_\_  
Property Owner's Name – **Please Print**

2. \_\_\_\_\_  
Property Owner's Name – **Please Print**

\_\_\_\_\_  
Property Owner's Signature/s

\_\_\_\_\_  
Property Owner's Signature/s

\_\_\_\_\_  
Property Owner's Street Address if not applicant

\_\_\_\_\_  
Property Owner's Street Address if not applicant

\_\_\_\_\_  
City State Zip Code

\_\_\_\_\_  
City State Zip Code

\_\_\_\_\_  
Phone No. Date

\_\_\_\_\_  
Phone No. Date

**SIGNATURE AND NAME OF APPLICANT IF OTHER THAN PROPERTY OWNER:**

1. \_\_\_\_\_  
Applicant's Name – **Please Print**

2. \_\_\_\_\_  
Applicant's Name – **Please Print**

\_\_\_\_\_  
Applicant's Signature

\_\_\_\_\_  
Applicant's Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Date

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**FOR STAFF USE ONLY**

Date received in Permit Services Center _____	Received by _____	Date Stamp _____
Fee paid _____	Receipt No. _____	