

Application for Parking Permits One-Way Car Share Program

Please read the Free-Floating Parking Permit Terms and Conditions and/or the Master Residential Parking Permit Terms and Conditions for the One-Way Car Share Program before completing and submitting this application.

Company Name:
Street Address:
City, State, Zip:
Contact Name:
Contact Title:
Contact Email:
Contact Phone:
Company Website:
Date of Application Submittal:
Berkeley Business License Number:

- 1. What is your company's operational model for one-way car share? Check one
 - a. Master Residential Parking Permit (MRPP) only
 - b. Free-Floating Parking Permit (FFPP) only
 - c. Combined MRPP/FFPP

2. Application type – Check one and fill out the corresponding information:

New operator in Berkeley	Initial fleet size proposed:	
 Existing operator – Fleet expansion 	Current fleet size:	Proposed expansion:
 Existing operator – Annual renewal 	Current fleet size:	Proposed expansion:
 Existing operator – Designated service area change 	Current fleet size:	Proposed expansion:

Note: 700 parking permits is the maximum allowed per qualified car sharing organization with an overall cap of 1600 for the one-way car share pilot program.

City of Berkeley, Public Works, Transportation Division, 1947 Center Street, 4th Floor, Berkeley, CA 94704 Tel: 510.981-7010 TDD: 510.981-6903 Fax: 510.981-7060

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- 3. Check the statements, as applicable, fill-in the blank, and attach required documentation
 - a. Our company would like to reserve ______ number of parking permits (attach car share vehicle purchase order)
 - b. Our company would like to purchase ______ number of parking permits (attach Detailed Vehicle Information form)
 - c. Our company is not purchasing or reserving parking permits
- 4. When do you propose beginning new operations, expanding your company's fleet, and/or changing your designated service area? Check one
 - a. July 1
 - b. October 1
 - c. January 1
 - d. April 1
 - e. Other (specify): _____
- 5. What is your fleet type? Check one
 - a. Passenger vehicle
 - b. Scooter/ Motorcycle
 - c. Other (specify): _____
- 6. Name all of the municipalities in your company's designated service area, including

Berkeley, and the estimated percent of fleet that will be in each jurisdiction on average.

Municipality:	Percent of fleet:
Municipality:	Percent of fleet:
	Total percentage:

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- 7. What percent of your company's designated service area in Berkeley encompasses Communities of Concern, as defined by the Metropolitan Transportation Commission?
- 8. Describe your company's outreach efforts in the City of Berkeley to date and in the future. Provide specific dates, timelines, neighborhood groups, and/or individual names, where possible. Attach a separate document if needed.

- 9. Attach to this document the following, as applicable:
 - Designated service area map (new or revised)
 - □ Vehicle branding photos or renderings (new or revised)
 - □ Annual Bay Area Master Parking Badge design with key dimensions (new or revised)
 - □ Certificate of Insurance with endorsements, as indicated in the terms and conditions.
 - Copy of Qualified Car Share Organization application with determination by the City of Berkeley of "Qualified" or "Conditionally Qualified"
 - D Purchase order for vehicles to reserve parking permits
 - □ Vehicle license plate numbers to purchase parking permits

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By signing this form, I attest that the above statements are true and that I have the authority to sign on behalf of the company ______.

Furthermore, I attest that I have read and agree to the following (mark all that apply):

- □ Free-Floating Parking Permit Terms and Conditions for the One-Way Car Share Program
- Master Residential Parking Permit Terms and Conditions for the One-Way Car Share Program

Signature and Date

For office use only		
	Designated service area	
	Reserved permits	
	Vehicle license numbers to purchase permits	
	Community outreach	
	Vehicle branding	
	Annual Bay Area Master Parking Badge	
	Certificate of Insurance	
	Qualified car share application	
Signea	1 by: Date:	
Print n	name: Position:	