



City of Royal Oak

City Clerk's Office
203 S. Troy Street
Royal Oak, MI 48067
(248) 246-3050

**ARTS, BEATS & EATS
2022 PARKING STATION**

APPLICATION MUST SUBMITTED by July 1, 2022 (60 DAYS PRIOR TO BEGINNING OPERATIONS) - PLEASE PRINT OR TYPE

DATE OF APPLICATION _____

IN ACCORDANCE WITH THE CODE OF ORDINANCES, CHAPTER 503, I/WE HEREBY APPLY FOR A LICENSE TO OPERATE A PARKING STATION DURING ARTS, BEATS & EATS, SEPTEMBER 2 - SEPTEMBER 5, 2022.

NAME OF APPLICANT _____ PHONE # _____

ADDRESS _____ ZIP _____

E-MAIL ADDRESS _____ ALT PHONE # _____

SALES TAX NUMBER _____ TYPE OF OWNERSHIP _____
(Partnership/Individual/Corp./Other)

RESIDENT AGENT IN OAKLAND CO: NAME _____

ADDRESS _____

OWNERS: The following information is required for processing. PLEASE ATTACH A COPY OF DRIVER'S LICENSE

1. _____	_____	_____	_____
Full Name	Title	Date of Birth	Phone #

Address / City / State / Zip			

2. _____	_____	_____	_____
Full Name	Title	Date of Birth	Phone #

Address / City / State / Zip			

3. _____	_____	_____	_____
Full Name	Title	Date of Birth	Phone #

Address / City / State / Zip			

LOT ADDRESS: _____ BUSINESS NAME _____

LOCATION: _____ OF STREET; BETWEEN _____ & _____
(E, S, W, N)

PROPERTY OWNED/LEASED? (CIRCLE ONE) TYPE OF BUSINESS _____

NAME OF PROPERTY OWNER: _____ PHONE: _____

ADDRESS: _____

NO. OF VEHICLES TO PARK _____ HOURS OF OPERATION _____

NAME:

ADDRESS:

APPLICATION FEE: _____ \$185.00
_____ \$150.00 (FEE FOR EXISTING REGULAR PARKING STATION)
_____ \$ 40.00 (PREMIUM FOR LOTS WITH 50+ SPACES)
_____ \$150.00 LATE FEE IF PAID AFTER JULY 1, 2022 WITH PREVIOUS
PARKING STATION FOR ARTS, BEATS & EATS.

____ SITE PLAN REQUIRED (See section “B” of the Ordinance for specifications. Please include location of sign on site plan)

____ PHOTOGRAPH OF SIGN – PRINTED AND IN COLOR (For sign dimensions and specifications see Sec. 503-4, Letter O))

____ CORPORATION STATUS REQUIRED (Good Standing)

____ SCHEDULE OF RATES REQUIRED: \$_____ Weekday (Friday) Daily Rate
 \$_____ Weekday (Friday) Evening Rate
 \$_____ Weekend (Sat - Mon) Daily Rate
 \$_____ Weekend (Sat - Mon) Evening Rate
 \$_____ Maximum Daily Rate

I/We hereby grant permission to the City Manager or his representatives, the Mayor or any Commissioner of the City of Royal Oak, free and open access to the place which the applicant proposes to occupy for the aforesaid business; and such access to be for the purpose of making inspection of said premises;

I/We will faithfully conform and cause the premises occupied to comply in all respects with all requirements of applicable Ordinances governing same;

The foregoing application, statements, and representations set forth herein are true to the best of my knowledge and belief.

DATE: _____ SIGNATURE: _____

PRINT NAME: _____

PLEASE RETURN COMPLETED APPLICATION TO: **CITY CLERK
CITY OF ROYAL OAK
203 S TROY STREET
ROYAL OAK, MICHIGAN 48067**

Fee Paid \$ _____ Cash _____ Check # _____ CC _____ Date: _____ Clerk _____

License # _____ Date Issued _____ Clerk _____

APPROVALS

CITY CLERK: _____ DATE: _____

PLANNING DEPARTMENT: _____ DATE: _____

BUILDING DEPARTMENT _____ DATE: _____

CHIEF OF POLICE: _____ DATE: _____