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**Alderman Brendan Reilly
42nd Ward**

Standing/Loading Zone Application

Please submit the following items with your application (incomplete applications will not be reviewed):

- o Letter requesting a standing or loading zone, detailing the reasons the zone is needed, o Photographs of the proposed location, adequately documenting the area surrounding the proposed standing/loading zone.
- o Diagram or map detailing the building, sidewalk, street, existing parking restrictions (meters, other loading zones, etc.) and location of the proposed standing/loading zone.

Please submit completed application to Alderman Reilly's Constituent Service Office: 325 West Huron Street, Suite 510
Chicago, Illinois 60654 (312) 642-4242 (312) 642-0420 (fax) projects@ward42chicago.com
<mailto:projects@ward42chicago.com>

BUSINESS INFORMATION

Business Name: _ Business Address:

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Billing Address: _

Federal Identification Number: \

Tax Kxcmpl Designation:

Present parking regulations at your location (e.g., meters

Business Hours: _ Scope of business activity: _

Business licenses held: £floX ga\Ag\,\^|»xeiJC ^ ^H^ftS

Contact name and title: Contact phone number:.

Signature of applicant

VALET LOADING ZONE

O Valet loading zones are designated for delivery of valet service by licensed operators, and for passenger loading and unloading. When not in use by a valet operator for valet service, valet zones may be used as a 30-minute loading zone by any commercial vehicle (standard loading zone restrictions apply). O Any passenger vehicle parking in a loading zone during restricted hours, but not utilizing valet services, is subject to citation.

Valet loading zone times requested:

Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday
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Length of zone requested: _

Valet Company Information

Name: _____
Business Address: _____

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(Contact person:

Contact phone: . ^3 ~ iv.nail:

On-site Manager(s):

Cellphone: -^2^

. Cell phone:

Name of business valet will serve:

Occupancy of business valet will serve:.

Other businesses served by valet operator (in closest proximity):

Location and description (# of parking spaces) of off-site parking areas, as required by Chicago Municipal

code: _____
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Please attach a copy of valet license (or application) and Certificate of Insurance.