



IFG CompaniesSM

Special Event Valet Parking Supplement

Complete one for each event location

1. Type of event: _____
2. Date and time of the event: _____
3. Location of event? _____
4. If this is a residential location will you be parking vehicles on the street? _____
5. Is the residential location in a gated community? _____
6. Is the area where customer's key's kept manned and locked at all times? Yes No
7. Is valet parking lot on the same premises listed above? Yes No
8. Are vehicles kept parked in a parking garage, underground storage facility or any other covered parking structures? Yes No
9. Will you be involved in any direction of traffic? Yes No
10. What kind of parking ticket do you use? _____
11. Are vehicles parked within sight of an attendant? Yes No
12. What is your procedure if a customer does not pick up their car by closing time? _____

13. Please describe how valet sections are separated from self-parking section of lot? (i.e. cones, ropes)

14. How many spaces are reserved for special event valet parking? _____

List Employees Parking for the above mentioned event						
	Last Name	First Name	Middle Initial	Sex (M/F)	Date of Birth	License No.
1						
2						
3						
4						
5						

NOTE

MVR'S ARE REQUIRED ON ALL INDIVIDUALS UNDER THE AGE OF 25 PRIOR TO PROVIDING A QUOTE