

“EXHIBIT A”

CITY OF BERKELEY
PUBLIC WORKS INSPECTIONS
8425 AIRPORT RD
BERKELEY, MO 63134

EMAIL: permitting@ci.berkeley.mo.us
PHONE: (314) 400-3713
FAX: (314) 264-2074

CHECK ONE
 NEW
 RENEWAL

UTILITY TRAILER PARKING PERMIT APPLICATION

Berkeley Ordinance No. _____, passed by the City Council on _____, prohibits the parking of any recreational vehicle or trailer that is not permanently registered to a City of Berkeley residence. Permits are intended for temporary parking. Filing of this application does not assure issuance of a permit. Each application will be reviewed by the City and decided upon in a timely manner. Any applicant who knowingly submits false or fraudulent information on this form will be denied a permit and could be subject to law enforcement. All applications must be made and submitted by a Berkeley resident and all vehicles must have a designated purpose (see reverse for conditions) for parking at said address. Proof of residency is also required (valid occupancy permit). By signing the application, the applicant agrees to comply with all applicable laws* and agrees to remove the vehicle upon expiration of the permit.

Applicant Name (Must be Berkeley Resident): <i>Teodoro Arzate Flores</i>		Registered Owner: <i>Teodoro Arzate Flores</i>	
Applicant Address: <i>8953 Bessmer Ave.</i>		Registered Address: <i>8953 Bessmer Ave.</i>	
Applicant Telephone: <i>314 755-9275</i>		Vehicle License No.: <i>57E 2WW</i>	Registration Mo/Yr.: <i>6-24-2010</i>
Applicant Email:		Vehicle Type: (Check Box) <input type="checkbox"/> RV <input checked="" type="checkbox"/> Trailer <input type="checkbox"/> _____ <i>Utility Trailer</i>	
Berkeley Parking Location (address): <i>same</i>		Make, Model, Year: <i>WINDY TRAILER 2010</i>	
Connection to Berkeley Address: <i>same</i>		Why must this vehicle be parked in Berkeley: <i>PERSONAL</i>	
Requested Length of Stay:		Requested Dates of Stay: <i>Permanent</i>	
By signing this application, I certify that all the information I have provided is true and correct, and that I will abide by all applicable rules, regulations, laws, and conditions.			
Signature of Applicant: <i>Teodoro Arzate Flores</i>		Date Submitted: <i>7-12-22</i>	
Permit Application Reviewed By:		<input type="checkbox"/> Approved <input type="checkbox"/> Denied <input type="checkbox"/> Council Review Dates Valid: _____ not to exceed 180 days	

**PLEASE NOTE: This permit is valid only on vehicles with a current and legal registration.
Please see conditions and restrictions on reverse side of this form.**



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Applicant Name (Must be Berkeley Resident): <i>TEODORO ARZATE FLORES</i>		Registered Owner: <i>TEODORO ARZATE FLORES</i>	
Applicant Address: <i>8953 Bessmer Ave.</i>		Registered Address: <i>8953 Bessmer Ave.</i>	
Applicant Telephone: <i>314 755-9275</i>		Vehicle License No.: <i>01E 8JM</i>	Registration Mo/Yr.: <i>7-13-2009</i>
Applicant Email:		Vehicle Type: (Check Box) <input type="checkbox"/> RV <input type="checkbox"/> Trailer <input type="checkbox"/> <i>Utility Trailer</i>	
Berkeley Parking Location (address): <i>same</i>		Make, Model, Year: <i>Bett Utili 2005</i>	
Connection to Berkeley Address: <i>same</i>		Why must this vehicle be parked in Berkeley: <i>Business</i>	
Requested Length of Stay:		Requested Dates of Stay: <i>Permanent</i>	
By signing this application, I certify that all the information I have provided is true and correct, and that I will abide by all applicable rules, regulations, laws, and conditions.			
Signature of Applicant: <i>Teodoro Arzate Flores</i>		Date Submitted: <i>7-12-22</i>	
Permit Application Reviewed By:		<input type="checkbox"/> Approved <input type="checkbox"/> Denied <input type="checkbox"/> Council Review Dates Valid: _____ not to exceed 180 days	

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