



**APPLICATION TO REQUEST ON-STREET
PARKING RESTRICTIONS**

This application and attached petition is for the designation of a permit restricted on-street residential parking area. The restriction is only applicable for blocks of residential areas immediately adjacent to a high school or public park where visitor demand can affect residential parking availability. In order for this application to be considered for approval, you must have the support of no less than two-thirds of the property owners of the block, demonstrated using the signed written petition to The City of Arvada.

The affected street immediately adjacent to both the park/school and the block cannot be part of the state highway system or outside of The City of Arvada jurisdiction. The application and petition will be reviewed by the TDM and Parking Coordinator and must be deemed necessary to approve the parking restrictions.

This is a revocable application, meaning the restricted designation can be removed by the Manager of the Mobility Division

Conditions of Approval – High School

- _____ 1. The block or some part thereof shall fall within one-half mile of the closest property line of a senior high school
- _____ 2. A written petition signed by no less than two-thirds of the property owners of the block requesting to be designated as a restricted parking area
- _____ 3. The street immediately adjacent to both the high school and the block cannot be part of the state highway system or within another jurisdiction.

***Multi-family dwellings such as condos and apartment buildings are represented by a single property owner/manager**

***Vacant or For Sale properties should be noted on the Petition from and will be excluded from the count**

Conditions of Approval – Public Park

- _____ 1. The block shall be immediately adjacent to a public park in, on or immediately adjacent to which there are pavilions, buildings or other publicly owned facilities which generate excessive traffic
- _____ 2. A written petition signed by no less than two-thirds of the property owners of the block requesting to be designated as a restricted parking area
- _____ 3. Residences shall be located in the block
- _____ 4. The street immediately adjacent to both the public school and the block cannot be part of the state highway system

***Multi-family dwellings such as condos and apartment buildings are represented by a single property owner/manager**

***Vacant or For Sale properties should be noted on the Petition from and will be excluded from the count**



CITY OF ARVADA

Public Works Department Traffic Engineering Division
8101 Ralston Road – Arvada, CO 80002
Phone – 720-898-7740 – Fax – 720-898-7755

This application, when completed, signed and accompanied by all required documentation, including the necessary petition, should be submitted to the Mobility and Planning Innovations (MPI) Division of Arvada Public Works Department for review and consideration. Please note, the Manager of the MPI Division or designee can deny or revoke applications based on the criteria outlined in our Municipal Code. This code can be reviewed at <https://arvada.org/city-hall/city-code/municipal-code>, specifically Chapter 54, Article VII.

I, DECLARE UNDER PENALTY OF LAW, THAT THE ABOVE STATEMENTS ARE TRUE AND CORRECT AND THAT ALL APPLICABLE CITY ORDINANCES AND REGULATIONS HAVE BEEN OR WILL BE COMPLIED WITH, IN ACCORDANCE WITH REVOCABLE ON-STREET PERMIT RESTRICTED AREAS. I/MY FELLOW NEIGHBORS WILL TAKE RESPONSIBILITY FOR ANY VIOLATION OF CITY OF ARVADA LAWS THAT OCCUR IN RELATION TO THE ACCEPTANCE OF THIS APPLICATION.

Signature

Print Name

Date



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PETITION FOR REQUESTING REVOCABLE
ON-STREET PERMIT RESTRICTED AREA

Applicant: Fill in the block details (hundred number of block and street name) and your contact information on the next page. Circulate this cover sheet and the signature page to every property owner of an address affected by this permit restriction. Copy and re-use additional pages if necessary.

Resident: The City of Arvada has received a request for a permit restricted on-street designation for your section of street. When such a request is received, we believe that those affected by the proposed on-street parking restriction should be notified in order to advise us if you agree or disagree with the request.

If two-thirds or more of the affected parties approve of the request, the Mobility and Planning Innovations (MPI) Division will take the request under consideration for final approval. Those not favoring the request will be given every possible consideration.

Attached is a request form with space for your signature, address, and phone number. Please mark **yes** if you are in favor, and **no** if you are not in favor of the above request.



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PETITION FOR ON-STREET PERMIT RESTRICTED AREA

Block(s) affected by petition: _____

Name of person circulating request: _____ Address: _____ Phone: _____

	SIGNATURE OF PROPERTY OWNER	ADDRESS OF PROPERTY OWNER	PHONE NO.	YES	NO
1.	<i>Signature</i>	<i>Address</i>			
	<i>Print Name</i>	<i>City,Zip</i>			
2.	<i>Signature</i>	<i>Address</i>			
	<i>Print Name</i>	<i>City,Zip</i>			
3.	<i>Signature</i>	<i>Address</i>			
	<i>Print Name</i>	<i>City,Zip</i>			
4.	<i>Signature</i>	<i>Address</i>			
	<i>Print Name</i>	<i>City,Zip</i>			
5.	<i>Signature</i>	<i>Address</i>			
	<i>Print Name</i>	<i>City,Zip</i>			
6.	<i>Signature</i>	<i>Address</i>			
	<i>Print Name</i>	<i>City,Zip</i>			
7.	<i>Signature</i>	<i>Address</i>			
	<i>Print Name</i>	<i>City,Zip</i>			

	SIGNATURE OF RESIDENT	ADDRESS OF RESIDENT	PHONE NO.	YES	NO
8.	<i>Signature</i>	<i>Address</i>			
	<i>Print Name</i>	<i>City,Zip</i>			
9.	<i>Signature</i>	<i>Address</i>			
	<i>Print Name</i>	<i>City,Zip</i>			
10.	<i>Signature</i>	<i>Address</i>			
	<i>Print Name</i>	<i>City,Zip</i>			
11.	<i>Signature</i>	<i>Address</i>			
	<i>Print Name</i>	<i>City,Zip</i>			
12.	<i>Signature</i>	<i>Address</i>			
	<i>Print Name</i>	<i>City,Zip</i>			
13.	<i>Signature</i>	<i>Address</i>			
	<i>Print Name</i>	<i>City,Zip</i>			
14.	<i>Signature</i>	<i>Address</i>			
	<i>Print Name</i>	<i>City,Zip</i>			
15.	<i>Signature</i>	<i>Address</i>			
	<i>Print Name</i>	<i>City,Zip</i>			
16.	<i>Signature</i>	<i>Address</i>			
	<i>Print Name</i>	<i>City,Zip</i>			

***HAS THIS PETITION BEEN CIRCULATED TO ALL OF THE RESIDENTS THAT WOULD BE AFFECTED BY THE PERMIT RESTRICTION? IF NO, STATE REASON _____**

****TWO-THIRDS OF PROPERTY OWNERS OF THE BLOCK AFFECTED BY RESTRICTION MUST AGREE TO LIMITATION**