



KLEIN INSURANCE SERVICES

Valet Parking

KLEIN INSURANCE SERVICES 8 HILLSIDE AVE, SUITE 108
MONTCLAIR, NJ 07042
TEL: 973-509-0080 ~ FAX: 973 754-0600

Name of Applicant/Insured: _____

1. Name of the business for which you provide valet service _____

2. What type of establishment are you parking for? _____

3. What is the lot location address? _____

4. What days of the week and hours of the day do you provide valet service? _____

5. Is the parking lot on their premises? Yes No

6. If the parking lot is not on their premises:
Do you drive customer's cars across a street to get to the lot? Yes No

Do you park customer's cars on the street? Yes No

7. How many spaces are reserved for valet parking? _____

8. Is self parking in a separate area? Yes No

9. Do you use at least a 3 part ticket? (customer, dashboard, with the keys?) Yes No

10. Where do you keep the customer's keys? _____

11. Is the lot manned by an attendant when open? Yes No

12. If not, is the lot fenced and gated for controlled access? Yes No

13. Do you provide valet service for special events? Yes No

If yes, describe in detail _____

14. How do you recruit, screen, and train your valets?
Explain in detail _____

15. What is the actual cost of labor? (hourly, contract, and tips) _____

16. Is the parking operated by hotel employees or a third party vendor? _____

If vendor, is there:
A contract between the parties available for review? Yes No

An additional insured endorsement in favor of our insured? Yes No

A hold-harmless agreement in place? Yes No

Date

Applicant's Signature