

# TOWN OF PALM BEACH

## Palm Beach Police Department

For Office Use Only  
Date stamp date of  
application

# Revocable Annual Valet Parking Permit Application

(The receiving department shall  
date stamp, scan and create a  
PDF. All departments will  
utilize email for all transmittals  
in this permit approval process)

Town Ordinance 15-02, Chapter 118 Articles V - Valet Parking Regulations,  
Sections: 145 through 160.

Application Date: 10.12.2022

Proposed Annual Valet Parking Address: 223 SUNSET AVE S. 100

Business Name: TREVINI RESTAURANT

Name of Business Owner (Permittee) for which Annual Valet Parking will be provided:

GIOVANNI MINERVINI

(The owner of the business is the Permittee and is ultimately responsible for the valet service and is subject to any Code Enforcement citations for violations of this Ordinance. In the Permittee's absence, the "person-in-charge" of the business will assume responsibility for any violations.)

Contact Telephone #'s for Business Owner (Permittee): (Business) 561 833 3883 (Cell) 561 386 7876  
(Home) \_\_\_\_\_

Business Owner's (Permittee) Mailing Address:

223 SUNSET AVE S. 100  
PALM BEACH FLA 33480

Name of Person In-Charge of Business Operation (if not owner): \_\_\_\_\_

Contact Telephone #'s for Person-In-Charge: (Business) \_\_\_\_\_ (Cell) \_\_\_\_\_  
(Home) \_\_\_\_\_

Seating Capacity of Restaurant or Commercial Property: 106

Proposed number of valets to work each shift: 2-3

Name of Business Owner's Insurance Company/Agent: JACK FLAGG, Marsh & McCann Agency

(Attach the Certificate of Insurance naming the Town of Palm Beach as an "additional insured" under your general liability policy with limits not less than \$1,000,000. per occurrence and \$2,000,000. aggregate covering bodily injury and property damage. Refer to Guidelines Sec. 118-149 (5) for additional insurance requirements.)

Address of Business Owner's Insurance Company/Agent: 4400 PGA Blvd Ste 1000

Contact # for Business Owner's Insurance Company/Agent: 561 622 2550

**TOWN OF PALM BEACH APPLICATION FOR A REVOCABLE ANNUAL VALET PARKING  
PERMIT**

Please give a brief summary of the business operation and the intended use of valet parkers:

VALET hours 5pm to 11:30pm  
7 days ; Parking guests cars in our  
building underground garage

(A Traffic Schematic Plan must be submitted with the application, refer to attached guidelines Sec. 118-149 through 151 for requirements for use of public right-of-way and/or storage of vehicle on private property)

As the business owner applying for this permit, for use of public property, hereby executes an agreement approved by the Town, providing for the valet parking operator to indemnify, hold harmless and defend the Town, its officers, agents and employees against and assume all liability for any and all claims, suits, actions, damages, liabilities, expenditures or causes of action of any kind arising from its use of the public streets or private or public parking lots for the purposes authorized in this article and resulting or accruing from any alleged negligence, act, omission or error of the valet parking operation, its agents or employees and/or arising from the failure of the valet parking operation, its agents or employees to comply with each and every requirement of this article or with any other Town, county, state or federal law or regulation applicable to the valet parking operation resulting in or relating to bodily injury, loss or life or limb, or damage to property sustained by any person, firm, corporation or other business entity.

As the business owner or person in-charge of the business as assigned by the business owner to oversee the valet service, I have read the above indemnification agreement and the attached provisions of the Town Code of Ordinances relating to the regulation of Valet Parking and agree to abide by all provisions set forth therein.

Signature of Applicant (Business Owner) (Permittee)

Date

STATE OF:

COUNTY OF:

The foregoing instrument was acknowledged before me this 13<sup>th</sup> day of

OCTOBER,

20 22, by GIOVANNI MINERVINI who is personally known to me, or

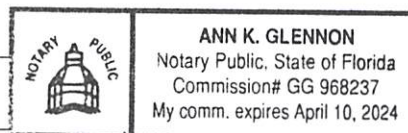
has produced \_\_\_\_\_ as identification and who did take

an oath. Ann K Glennon

Notary Public GG968237

Commission Number ANN K GLENNON

(Notary Name, typed, printed or stamped)



TOWN OF PALM BEACH APPLICATION FOR A REVOCABLE ANNUAL VALET PARKING PERMIT

The valet parking operator applying for this permit, for use of public property, hereby executes an agreement approved by the Town, providing for the valet parking operator to indemnify, hold harmless and defend the Town, its officers, agents and employees against and assume all liability for any and all claims, suits, actions, damages, liabilities, expenditures or causes of action of any kind arising from its use of the public streets or private or public parking lots for the purposes authorized in this article and resulting or accruing from any alleged negligence, act, omission or error of the valet parking operation, its agents or employees and/or arising from the failure of the valet parking operation, its agents or employees to comply with each and every requirement of this article or with any other Town, county, state or federal law or regulation applicable to the valet parking operation resulting in or relating to bodily injury, loss of life or limb, or damage to property sustained by any person, firm, corporation or other business entity.

As owner or person in-charge of the valet service, I have read the above indemnification agreement and the attached provisions of the Town Code of Ordinances relating to the regulation of Valet Parking and agree to abide by all provisions set forth therein.

*Mark Long*

Signature of Valet Parking Business Owner

*9.29.22*

Date

STATE OF:  
COUNTY OF:

The foregoing instrument was acknowledged before me this *29th* day of *September*

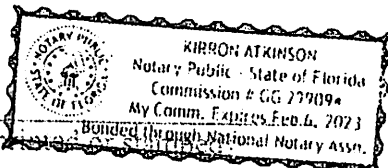
20 *22*, by *WILLIAM LEONE* who is personally known to me, or

has produced *FLDL* as identification and who did take

an oath.

*[Signature]*  
Notary Public

*02/06/23*  
Commission Number



(Notary Name, typed, printed or stamped)

# TOWN OF PALM BEACH APPLICATION FOR A REVOCABLE ANNUAL VALET PARKING PERMIT

## Valet Parking Service Information

**Name of Valet Parking Business:** Palm Beach Parking

**Owner of Valet Parking Business:** Carole Weitzman **Number of Employees:**  
2 or 3 staff

**Contact Telephone #'s of Valet Parking Service Owner: (Business)** \_\_\_\_\_ **(Cell)** 215-470-1000  
**(Home)** \_\_\_\_\_

**Name of Person In-Charge of Business Operation (if not owner):** Nick Leone

**Contact Telephone #'s of Person-In-Charge: (Business)** \_\_\_\_\_ **(Cell)** 561-308-0720  
**(Home)** \_\_\_\_\_

**Name of Valet Company's Insurance Company:** on file  
(Attach the Certificate of Insurance naming the Town of Palm Beach as an "additional insured" under your general liability policy with limits not less than \$1,000,000. per occurrence and \$2,000,000. aggregate covering bodily injury and property damage. Refer to Guidelines Sec. 118-149 (5) for additional insurance requirements.)

**Address of Valet Company's Insurance Company/Agent:** \_\_\_\_\_

**Contact # for Valet Company's Insurance Company/Agent:** \_\_\_\_\_

**Traffic Schematic Plan attached: Yes / No. If no, why?** we park on the street and on property

## Private Property Owner Information

**Name of Property Owner at Temporary Valet Parking Location:** \_\_\_\_\_

**Property Owner Mailing Address:** \_\_\_\_\_

**Property Owner Telephone: #'s: (Bus.)** \_\_\_\_\_ **(Cell)** \_\_\_\_\_ **(Hm)** \_\_\_\_\_

**Private Property Approvals attached: Yes / No. If no, why?** \_\_\_\_\_

**\*\* A completed application package should include:**

1. Application forms - pages 1 - 6.
2. Insurance documents as required.
3. Traffic Schematic Plan.
4. Private Property approvals, if applicable, diagram, and other information as required.
5. Payment - \$400.00 per staging area.

(Signature of Valet Parking representative required on following page)

Town of Palm Beach  
Finance Department  
360 S. County Rd  
Palm Beach, FL 33410  
www.townofpalmbeach.com  
Welcome

029959-0009 Veronica 10/13/2022 12:37PM

FINANCE

Payment Tran Code: Valet

Permit (Valet)

Description: Travini

Restaurant

Valet Permit (Valet)

2023 Item: Valet

Valet Permit (Valet) 400.00

001.342.170 400.00C

400.00

Subtotal 400.00

Total 400.00

CHECK 400.00

Check Number 1729

Change due 0.00

TOWN INC  
D&A TRAVINI RESTAURANT  
204 HUNTER AVE STE 100  
PALM BEACH, FL 33480-4377

10/12/22

1729

Town of Palm Beach

Your handout of 200.00

PNC BANK

Annual Bank Application

Thank you for your payment

Town of Palm Beach COPY  
DUPLICATE RECEIPT