

All registrations match
address:
Yes or No

Pass Garage Inspection:
Yes or No



Archon Protection

1500 Palma Drive Suite 130, Ventura CA 93003
PPO: 16394



Cash or Check

Permit # _____

Check # _____

2020 Vista Urbana Parking Variance Application

Archon Protection's **parking variance system** has been designed to enhance community security and expedite notifications in cases of emergency. Variances will be issued only to Vista Urbana residents under the following circumstances*:

1. **You must submit a copy of each vehicle's registrations that are listed below.**
2. There are a minimum of 3 (three) registered vehicles to the applicant's Vista Urbana household with a two vehicle garage.
3. There are a minimum of 2 (two) registered vehicles to the applicant's Vista Urbana household with a single parking space/garage.
4. Each of the 2-3 vehicles are currently registered with the CA DMV to the applicant's Vista Urbana address.
5. The below application is filled out accurately in its entirety.
6. The resident pays a \$30 annual fee to Archon Protection per vehicle requesting a parking variance.
7. **The resident's garage/parking space MUST HAVE one-two of the three registered vehicles (the two non-permitted vehicles) PARKED INSIDE the garage/parking space at the time of inspection or else a permit will NOT be issued.**

Limitations:

- a. Parking variances will be limited to 1 (one) per household.
- b. Parking variances will not be issued to accommodate storage of non-operating or non-registered vehicles.
- c. Parking variances automatically expire on December 31st of the year they are issued.
- d. Parking variances may NOT be transferred to any other vehicles than the one they are issued to.
- e. Archon Protection reserves the right to revoke any parking variance without notice.

Please fill out the below completely:

Circle One:

One Car Garage

Two Car Garage

Reserved Space

Resident's Name: _____

Address: _____ Phone: _____

Email for Correspondence and Communication: _____

Vehicles Registered to the above address (Must be inside garage/in parking space at time of Inspection)

Color: _____ Make: _____ Model: _____ License#: _____

Color: _____ Make: _____ Model: _____ License#: _____

Vehicles to be issued Parking Variance (Outside Garage)

Color: _____ Make: _____ Model: _____ License#: _____

Signature: _____ Date: _____

Complete applications can be submitted by email to
JenniferLiwanag@archonprotection.com

*Homeowners with legitimately oversized vehicles are not required to own three vehicles to apply for a parking variance. Proof that the vehicle does not fit must be shown during the garage inspection.