PARKING OCCUPANCY TAX (POT)
APPLICATION FOR REGISTRATION NUMBER

City of Los Angeles, Office of Finance
200 N. Spring St. Rm 101 Los Angeles, CA 90012
Email application to: finance.autopark@lacity.org

If you are currently registered, please provide your account number: _____

Parking Occupancy Tax (POT) Information

Type of Parking Facility: (Please check all that apply)

Surface Lot ☐ Commercial Building ☐ Free-standing Garage ☐ Attended Lot ☐ Unattended Lot ☐

Type of Parking Offered: (Please check all that apply)

Daily ☐ Coin/Meter ☐ Monthly ☐ Lease ☐ Valet Services ☐ Validated ☐ Special Event(s) ☐

Days of Week Operated:_____ **Hours of Operation:**_____ **Number of Parking Spaces:**_____

Maximum Vehicle Occupancy:_____ **Mode of Payments:** (Check all that apply) Credit Card ☐ Cash ☐

Please describe additional services that you provide, including valet services, storing of vehicles, etc.:

_____

_____

The Following Information Is Subject to Disclosure:

Business Type: Individual ☐ Partnership ☐ Corporation ☐ LLC ☐ Trust ☐

Please print or type:

Legal Name: _____

Business Address: _____

City: _____ State: _____ ZIP code: _____

Business Address Type: Commercial Location ☐ Residence ☐

Doing Business As (DBA): _____

Care of (C/O): _____

Mailing Address: _____

City: _____ State: _____ ZIP code: _____

Mailing Address Type: Commercial Location ☐ Residence ☐

Starting Date of Business in the City of Los Angeles: Month_____ Day_____ Year _____

Federal Employer Identification Number (FEIN):_____

Business E-mail Address: _____ Business Phone Number:_____

Contact Person: _____ Title: _____

Taxable Parking Services Charges Billed

Actual Taxable Parking Services Charges Billed to Customers in the Previous 36 Months and Current Calendar Year:

Month / Year	20__	20__	20__	20__
January				
February				
March				
April				
May				
June				
July				
August				
September				
October				
November				
December				

Declaration

I declare, under penalty of perjury under the laws of the State of California, that to the best of my knowledge the foregoing is true, correct and complete.

Signature of Owner or Agent: _____ Date: _____

Print name of Owner or Agent: _____ Phone Number: _____

Title: _____ Email Address: _____

Please sign and email the completed form to: finance.autopark@lacity.org or mail it to the address provided on the front page of this form.

ATTENTION - PLEASE READ

Information regarding the Parking Occupancy Tax Collection Bond requirements, Parking Occupancy Tax, POT Collection Bond Exemption, Tax Enforcement Programs, and L.A.M.C. Section 21.15.6 is available at the following Office of Finance link: https://finance.lacity.org/mandatory-parking-occupancy-tax-collection-bond-requirement

Parking Lots that may be subject to a Police Permit should contact the LAPD Criminal Investigation Division at (213) 996-1210 to determine which permits are required.

Non-financial information such as name, business address, etc., contained in your City of Los Angeles tax and permit records, is subject to public disclosure under provisions of the California Public Records Act, Government Code Section 6250 et seq. Your residential information may also be subject to public disclosure if that location is utilized for business and/or mailing purposes.