

FIRST STREET GARAGE ACCESS APPLICATION

(FOR THE MONTH OF FEBRUARY, 2011 ONLY)

CAMBRIDGE RESIDENTS ONLY

Name \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Telephone Number \_\_\_\_\_

Email Address \_\_\_\_\_

Resident Parking Permit # \_\_\_\_\_ Registration # \_\_\_\_\_

Expiration Date Of Vehicle Inspection Sticker \_\_\_\_\_

Vehicle Owner's Signature \_\_\_\_\_

Remit Application to:

Traffic, Parking and Transportation

344 Broadway

Cambridge, MA 02139

Attn: Margaret Ranstrom

Fax: 617-349-4747

Email: [mransstrom@cambridgema.gov](mailto:mransstrom@cambridgema.gov)

- Must be a Cambridge Resident with a valid Resident Parking Permit on the vehicle
- Must have a valid up to date inspection sticker and registration
- Vehicle owner is responsible for making sure their vehicle is in a safe condition, is not a hazard to other users of the garage and is in driving condition. Any vehicle considered a safety hazard will be towed immediately.
- Vehicle owner is responsible for all items left in their vehicle
- Failure on any of these accounts will subject the vehicle to being towed at the owner's expense
- Upon approval, application will be forwarded to the East Cambridge Garage
- Payment of \$50.00 will be taken at the East Cambridge Garage (cash or check)

Approved By: \_\_\_\_\_



55 First Street  
Cambridge, Ma 02140  
Ph 617-349-4754 / Fax 617-349-4768

**MONTHLY PARKING AGREEMENT**

Location
Key Card #
Key Card Charge \$
Monthly Rate \$

Date: \_\_\_\_\_

Employer Pays      Individual Pays  
Parker Update      Vehicle Update

Name of Parker: \_\_\_\_\_

Name of Company: \_\_\_\_\_ Company Address: \_\_\_\_\_

Billing Address: \_\_\_\_\_

City, State, Zip: \_\_\_\_\_

Work Phone: \_\_\_\_\_ Home/Cell: \_\_\_\_\_

Email Address: \_\_\_\_\_

**PRIMARY VEHICLE:**

PLATE		MAKE		MODEL
COLOR		STATE		YEAR

**SECONDARY VEHICLE:**

<b>PLATE</b>		<b>MAKE</b>		<b>MODEL</b>
<b>COLOR</b>		<b>STATE</b>		<b>YEAR</b>

**I UNDERSTAND THAT:**

- If I am a keycard holder, I understand that I must pay for the initial keycard and I understand that I must pay for any lost or stolen keycard. These replacement costs or fees are subject to change.
- If I pay by check, and it is returned for any reason, I must pay the returned check fee.
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- Month to month payments are due by the first business day of each month.  
Any and all payments are non-refundable.
- Monthly parking is non-transferable.
- This agreement is not a lease, and no bailment is created between the holder of a keycard and the City of Cambridge, or its agents or employees, with respect to the holder's motor vehicle or any personal property contained in the vehicle. This agreement grants the holder a personal license to park a motor vehicle at this facility, at the holder's own risk and in accordance with the terms of this agreement. The license granted shall not be assigned by the holder.
- The City of Cambridge, its agents and employees, are not responsible for any loss or damage to any motor vehicle, or its contents, by fire, theft, collision or any other cause, or for anything contained in any vehicle. It is the holder's responsibility to remove all items of value from the vehicle. The holder hereby releases the City of Cambridge, and its agents and employees from any and all responsibility in connection with the holder, the holder's motor vehicle and the holder's other personal property. In the event that the holder suffers any loss to person or property, the holder shall look solely to his or her insurance coverage, if any, and shall make no claim whatsoever against the City of Cambridge.

By signing this document, I acknowledge I have read and fully understand all conditions set forth above and I am aware of understand the City of Cambridge Rules Governing Use of Parking Facilities.

**Signature of Parker:** \_\_\_\_\_

**Date:** \_\_\_\_\_

(Office use only)  
(Office use only)

<p><b>Comments:</b></p>	<p><b>Effective date:</b> _____</p> <p><b>Accepted by:</b> _____</p>
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