



Date _____

APPLICATION FOR METER HOOD

_____ Construction Hoods

_____ Service Hoods

_____ Special Hoods

Business Name _____ Telephone _____

Applicant's Name _____ Telephone _____

Address _____ **(Attach Business Card Here)**

Short description of hood usage: _____

List locations for proposed use:

List vehicles to be used with hoods:

Make/Year License No

We, the applicants for the above meter permits/hoods, do agree to pay the City of San Jose in accordance with and abide by the requirements outlined in Sections 11.40.140 -11.40.150 of the City of San Jose Municipal Code, as applicable. We understand that the meter hood(s) is standby only, and it will not reserve the space for us. We agree to return the hoods(s) to the Department of Transportation at 4 North Second Street, San Jose, on the day of expiration or forfeit the hoods deposit.

Name

Title

Contractor License No.

Hood #'s Assigned: **Exp. Date:**

CSJ Rep: _____