All registrations match address:

Yes or No

Pass Garage Inspection: Yes or No



Cash or Check (circle one)			
Permit #			
Check #			

## 2025 Westwind Parking 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 Westwind residents under the following circumstances\*:

- 1. You must submit a copy of **each** vehicle's registrations that are listed below.
- 2. There <u>are a minimum</u> of 5 (five) registered vehicles to the applicant's Westwind household with a two-vehicle driveway.
- 3. There <u>are a minimum</u> of 6 (six) registered vehicles to the applicant's Westwind household with a three-vehicle driveway.
- 4. Each of the 5 or 6 vehicles is currently registered with the CA DMV to the applicant's Westwind address.
- 5. The below application is filled out accurately in its entirety.
- 6. The resident pays a \$40 annual fee to Archon Protection per vehicle requesting a parking variance.
- 7. The resident's garage MUST HAVE two of the registered vehicles (the two non-permitted vehicles) PARKED INSIDE the garage at the time of inspection as well as two of the registered vehicles parked on the driveway or else a permit will NOT be issued.

## Limitations:

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

## Please fill out the below completely

Resident's Nam	ne:		
Address:		Phone:	
Email for Corres	spondence and Communi	cation:	
Ve	hicles Registered to the ab	ove address (Must be insid	e garage at time of Inspection)
Color:	Make:	Model:	License#:
Color:	Make:	Model:	License#:
Color:	Make:	Model:	License#:
Color:	Make:	Model:	License#:
Color:	Make:	Model:	License#:
	Vehicles to be is	sued Parking Variance (Op	en Parking Space)
Color:	Make:	Model:	License#:
Signature:		Date:	

Completed applications can be submitted by email to csr@archonprotection.com