

All Registrations match  
address:  
Yes or No

Pass Garage Inspection:  
Yes or No



# Archon Protection

1500 Palma Drive Suite 130, Ventura CA 93003  
800-274-5717



Cash or Check

Permit # \_\_\_\_\_

Check # \_\_\_\_\_

## 2026 Las Palomas Parking Permit Application

Archon Protection permits will be issued only to Las Palomas residents under the following circumstances\*:

1. **You must submit a copy of each vehicle's registrations that are listed below.**
2. You must submit pictures of ALL vehicles listed on the application in the corresponding location. Pictures must show front, rear, and both sides of the vehicle. Pictures showing only the vehicle license plate will be rejected.
3. Max (1) Resident Permit is allowed per address unless there is a reasonable request for a second permit (Exception request will be sent to the Las Palomas Board of Directors).
4. There is a minimum of 3 (three) vehicles registered to the applicant's Las Palomas household, or a vehicle is too large to fit into the garage.
5. There is a minimum of 2 (two) vehicles registered to the applicant's Las Palomas household (First come, first served basis, with only 35 permits available for this scenario).
6. The below application is filled out accurately in its entirety.
7. The resident pays a \$40 permit processing fee to Archon Protection per vehicle requesting a parking permit.
8. Obtaining a parking permit does not guarantee the availability of a Common Area parking space.

Limitations:

- a. Parking variances will not be issued to accommodate storage of non-operating or non-registered vehicles.
- b. Parking variances automatically expire on December 31<sup>st</sup> of the year they are issued.
- c. Parking variances may NOT be transferred to any other vehicle.
- d. Archon Protection reserves the right to revoke any parking variance.

### Please fill out the below completely:

Resident's Name: \_\_\_\_\_

Address: \_\_\_\_\_ Phone: \_\_\_\_\_

Email for Correspondence and Communication: \_\_\_\_\_

#### Garaged vehicles Registered to the above address

Color: \_\_\_\_\_ Make: \_\_\_\_\_ Model: \_\_\_\_\_ License#: \_\_\_\_\_

Color: \_\_\_\_\_ Make: \_\_\_\_\_ Model: \_\_\_\_\_ License#: \_\_\_\_\_

#### Vehicle to be issued Parking Permit

Color: \_\_\_\_\_ Make: \_\_\_\_\_ Model: \_\_\_\_\_ License#: \_\_\_\_\_

The undersigned hereby attests that the statements made on this application are true and accurate and agrees to be bound to all the terms and provisions set forth on this application. The undersigned further acknowledges that they have read and understand all of the association's parking rules and regulations and agree to follow them, and that any illegally parked vehicle may be towed as provided by law.

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

Complete applications can be submitted by mail or emailed to

[CSR@ArchonProtection.com](mailto:CSR@ArchonProtection.com)

PPO: 16394