

Streets Division * Parking * Color Curb Program



COLOR CURB APPLICATION FORM

NOTE: Please Allow 30 days to Process New Requests

To begin processing, please fill out this application form completely, sign, date and submit it to Color Curb Program at 1 South Van Ness Avenue, 7th Floor, San Francisco, CA 94103-5417

Please include the non-refundable processing fee for all white, green and driveway red zone requests. Please make the check payable to SFMTA Color Curb Program, and do not include the paint fee; you will be invoiced for the paint fee when and if the zone is approved.

For general questions regarding the Color Curb Program or regarding the required processing fees, visit www.sfmta.com and type in "new color curb" in the search box.

SECTION 1: APPLICANT INFORMATION

Name of Applicant:		Title:
Business Name (if applicable):		Phone:
Address of Requested Zone:		Email:
Billing Address (if different from above):		Fax:
San Francisco, CA 94		Prefer to be contacted via:
 Type of Zone, check all that Location of the Zone: With 	SECTION 2: ZONE REQUEST IN at apply: Yellow Blu Driveway Red Zone (s t - application and instation your frontage? Yes/No, Front S	e
	ODITIONAL INFORMATION ONLY FOR (or number of parking spaces): _	YELLOW, GREEN WHITE OR BLUE ZONES
4. Type of Business (check or		☐Hotel ☐ Residential ☐ Restaurant ☐ Office ☐ Other:
5. Size of Business (provide a	s applicable): Number of:	_sq. ftseatsrooms/units
6. Business Hours and Days:		
7. FOR YELLOW ZONES:	b. Typical size and type of truck	ily: Number of trucks simultaneously:
FOR WHITE OR GREEN ZONES:		visitors daily
FOR BLUE ZONES:		ersons visiting premises daily
Please describe the purpose a	SECTION 4: PURPOSE AND Section 5: Purpose AND	GIGNATURE
Signature:		Payment submitted on: h Van Ness Avenue, 7 th Floor San Francisco, CA 94103-5417