



Alexandria Bike Corral Application

Applicant Information

Applicant Type: Property Owner Business Owner/Mgr

Business Name: Business Type:

Address:

Owner/Mgr Name: Owner/Mgr Title:

Phone Number: Email Address:

Location Information

Approx. Corral Address:

Nearest Cross Streets:

Corral Location: On-Street Parking Off-Street Parking
Sidewalk Street

Please Describe Placement
of Proposed Corral
(Attach Photo):

Site Information

Storefront Length: Sidewalk Width: Speed Limit:

of Existing Bike Racks: # of Requested Racks (Min. 3):

Other Bike Facilities: Surrounding Uses:

Are any of the following Present?: Bus Stop Fire Hydrant
Metered Parking Handicap Parking
Tow Away Zone Loading Zone
Active Driveway Travel Lane
Turn Lane