

Lease Required & Provided: Y N

Permits Released By:

Violations: Y N

## 2020 Parking Pass and **Resident Information Form**

Unit Owner Information:	ng imormation, prir	iting clearl	y. For landlords, you will ne	eed to provide a	a copy of the curi	ent ratified lease.
Name:				Tpl		
Mailing Address:				Phone:		
			7texada	Alt-Phone:		
41		/ \ A==	Zipcode:	Email:		
Check all that apply: Owner () Resident () Agent ()  Signature of owner below acknowledges that said individual(s) as checked above may act on my behalf regarding CCC parking permits, including ordering replacement permits (cost to be paid by ordering party). Further, owner has reviewed the completed Parking Pass and Resident Information Sheet and certifies that it has been filled out in its entirety.  Management reserves the right to work only with the owner in matters pertaining to parking passes.				Agent Information (if applicable):		
				Name:		
				Company:		
O C:			Date:	Phone:	Email:	
Resident Information: This information is requested solely	y for emergency purposes					
Name	DOB		Emergency Contact Information:			
				Name: Phone: Alt-Phone 1: Alt-Phone 2:		
				1		
				1		
/ehicle Information:						
Owner Name	Year	Make &	Model	Tag #	State	Color

Permit Numbers Issued:

Date Released: