

Annual Parking Information
Update

Date: _____

Name: _____

Apt. #: _____

Re: Parking Information

Please fill in the items below regarding your vehicle:

CAR MAKE & MODEL _____

CAR COLOUR _____

LICENCE NUMBER _____

SPOT NUMBER _____

ACCESS CARD NUMBER _____ (Number is on the bottom right
hand corner on the back of the parking access card)

Insurance Expiration Date _____

Please make sure that the office has a copy of 1) your current vehicle insurance and 2) ownership that identifies the vehicle as belonging to yourself (including both the plate and vehicle portions of the permit)

Please return this to the office as soon as possible. If there are any changes in the future, please notify the office.

Your co-operation is appreciated.

Thanks in advance,