

Mirror Lake Condominium Parking Permit Application

1). RESIDENT INFORMATION

First Name:		Last Name:	
Condo Address:	Building: _____ Unit #: _____	Home Address:	Street: _____ City: _____ State: _____ Zip: _____
Phone Number:		E-mail:	

2). Resident / Guest / Renter

VEHICLE INFORMATION

First Name	Last Name	R/G/R	Make	Model	Color	License #

3). DATES FOR PERMIT

Arrival Date:	Leaving Date:
I hereby certify that the above information provided is correct.	
Resident's Signature: _____	Date: _____

Mirror Lake Condominium Association agrees to keep this information confidential and use it only for the purpose of issuing guest parking permits and enforce association rules. Print out this form, fill it out and deposit it in the Mirror Lake Condo Association's office.