

**LAKELAND 55 HOMEOWNERS ASSOCIATION**



**OVERNIGHT PARKING APPLICATION**

*(Common area parking lot)*

APPLICANT INFORMATION	
Name:	
Address:	
Lot #:	
Phone:	

VEHICLE / RECREATIONAL VEHICLE INFORMATION			
Registered Owner/Rental Company:			
Driver:			
Address:			
Year:	Make:	Model:	Color:
License Plate:		(or) VIN#:	

Proposed Start Date:
Proposed End Date:
Additional Comments:
Signature of Applicant:
Date Submitted:

BOARD OF DIRECTORS USE ONLY
Date Approved:
Approved By:
Reason For Denial:
Approved Start Date:
Approved End Date:
Permit Number: