

## Attestation In Support of Application For Long-Term Overnight Parking Permit

		l,					(print name)		
		duly authorized owner or manager of the property listed below, hereby attest that the							
		following parking spaces on the premises are available for the applicant listed below.							
Name of a	pplicant								
						1 11 15 1			
Address of	building					Unit / apa	rtment number of applicant		
Duration of lease (if applicable)					Number of parking spaces		Number of vehicles		
From			to		available to applicant		registered to applicant		
Additional comments									
		And I have signed,							
		This day of the month of 20							
		Signature: (property owner or manager)							
		-		(property owner or manager)					
		51							
		Phone number: (property owner or manager)							
				,					