

## RENTAL PARKING STALL AGREEMENT By Owner

Unit 2-1271 Sargent Avenue, Winnipeg, MB R3E oG3 Phone 204-489-9510 Fax 204-975-1540

| /we,  |   |
|---|---|
| (P:   | rint Name in Full)                              |
| Of  |   |
| (   | (Street Address)                                |
| Do hereby apply to rent supplemental parking st   | tall No, effective on the first day of,         |
| 20, for a monthly fee of <b>(\$)</b>              | dollars to be included with this application.   |
| Γhe above stall is in addition to stall No        | which is included with the monthly common fees. |
| I/we agree to provide one month's notice in writ  | ting of cancellation of the supplemental stall. |
| Γhe vehicle that will be parked in the additional | stall is:                                       |
| (Make, model, colour)                             | (License No.)                                   |
| (Signature)                                       | (Date)  |
| Home Phone  | Work Phone                                      |
|   |   |
|   | <u>Optional</u>                                 |
| Please ass this amount to m                       | ny/our monthly pre-authorized payment.          |
|   | (Signature)                                     |