

FORM FOR REQUEST FOR CHANGE OF PARKING

NB : ANY CHANGE OF PARKING IS ALWAYS MADE BY DATE OF CLOSING.

NAME : (Readable) _____

Phone number : _____ **Condo # :** _____

Applicant's email: _____

NB: When a request is granted, you must fill a new one if necessary.

Applicant's signature : _____

Form sent to the parking manager by email to: **locbuilding12b@gmail.com**

Application date : _____

Review : April 2025