

# Los Lagos Condominium Owners Association

c/o Sunstate Management

PO Box 18809, Sarasota, FL 34276

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## Parking Permit Form

Los Lagos Address: \_\_\_\_\_

Owner(s) Name: \_\_\_\_\_

Owner's Email Address (es): \_\_\_\_\_

Residence is Owner occupied \_\_\_\_ Leased \_\_\_\_ (# of months \_\_\_\_ ) - Lease dates: \_\_\_\_ to \_\_\_\_

Resident Information: Owner \_\_\_\_ Tenant \_\_\_\_

Name(s) of all Resident Drivers:

\_\_\_\_\_

\_\_\_\_\_

Phone: \_\_\_\_\_

Cell: \_\_\_\_\_

### Vehicle Information:

1. Driver's Full Name: \_\_\_\_\_ (Owner \_\_\_\_ Tenant \_\_\_\_)

Make: \_\_\_\_\_ Model: \_\_\_\_\_ Color \_\_\_\_\_

Year: \_\_\_\_\_ Tag #: \_\_\_\_\_ State: \_\_\_\_\_

2. Driver's Full Name: \_\_\_\_\_ (Owner \_\_\_\_ Tenant \_\_\_\_)

Make: \_\_\_\_\_ Model: \_\_\_\_\_ Color \_\_\_\_\_

Year: \_\_\_\_\_ Tag #: \_\_\_\_\_ State: \_\_\_\_\_