



DADELAND CAPRI CONDOMINIUM ASSOCIATION, INC.

305-740-8155 Fax# 305-740-8160

dadelandcapri@aim.com

PARKING SPACE LEASE

Name _____ Phone # _____

Unit # _____

Parking Space # _____

Make of Auto _____ Model _____ Color _____

I _____, understand that this parking space number will be a lease for the period between _____ and _____. It is my responsibility to come to Association office to renew the lease. If I am interested in renewing the lease, I must come to the office 10 days prior to renew. Once my lease is expired, I may be towed away from the parking space at managements' request.

Signature

Date

- Only registered resident will be able to lease parking spaces.

