

POINT O'WOODS ASSOCIATION, INC.

P. O. Box 152, South Lyme, CT 06376

Permit #

Parking Permit Application

This information is confidential and is to be used solely for the purpose of Point O'Woods Security in case of an emergency.

OWNER INFORMATION	
Name:	
Point O'Woods Address:	
Home Address:	
Home Phone:	
Cell Phone:	
Email:	

I have received the parking stickers for the above named property. I also acknowledge that Point O'Woods Association, Inc. assumes no liability for the theft or damages to my vehicle or property parked in the parking lot. I also understand that the sticker marked "RESIDENT" does not allow me to park in the parking lot, only the numbered parking sticker authorizes parking in the lot.

Signature: _____ Date: _____

NOTE: Proper display of parking permits is in the lower right corner of the windshield on the passenger side of the vehicle.