

STRAWBERRY HILL VILLAGE HOA
Request for Temporary Street Parking Permit

HOME OWNER NAME(S)

UNIT NUMBER _____

HOMEOWNER CONTACT INFORMATION:

TELEPHONE _____

E-MAIL _____

IS THE REQUEST FOR:

_____ HOMEOWNER or

_____ VISITOR

TIME PERIOD FOR REQUEST (Not to Exceed 90 Days) _____

REQUIRED INFORMATION FOR VEHICLE USING EXCEPTION

MODEL OF VEHICLE _____

COLOR OF VEHICLE _____

VEHCILE LICENSE PLATE NUMBER _____

Note: If the exception is approved, parking must either be on the Central Avenue side of the complex to the right or left of the "One Way" sign or on the pool side of the complex to the right or left of the mailboxes.

HOMEOWNER(S) SIGNATURE(S):

DATE: _____