



NAME	BUSINESS PHONE
ADDRESS	RESIDENCE PHONE
CITY	EMAIL
VEHICLE MAKE	ALTERNATIVE VEHICLE MAKE
VEHICLE PLATE	ALTERNATIVE VEHICLE PLATE
PARKING TO COMMENCE	INT. PAYMENT ENCLOSED

## PRE-AUTHORIZED PAYMENT

DATE




BRANCH

BANK

ACCOUNT NUMBER

Conditions: For verification please enclose one of your cheques marked "VOID". Please debit my/our account indicated above each month for payments payable to 'The Parking Place Inc.' for the amount of my/our monthly parking rent plus any applicable taxes. Your treatment of each payment shall be the same as if I/we had personally issued a cheque authorizing you to pay as indicated and to debit the amount to my account. This authorization may be cancelled any time upon written notice by me/us any delivery of this authorization to you constitutes delivery by me/us. FOR JOINT ACCOUNT ALL DEPOSITORS MUST SIGN IF MORE THAN ONE SIGNATURE IS REQUIRED ON ACCOUNT.

SIGNATURE

SIGNATURE

## FOR OFFICE USE ONLY

DECAL #

ACCESS CARD #

LOCATION



CHEQUE

CASH

### INITIAL CHARGES

RENTAL

GST

DECAL

ACCESS CARD

TOTAL

In consideration of the privilege of parking in the (name of garage) \_\_\_\_\_ the 'Facility' I/we the undersigned have read and agree to abide by all the terms and conditions (including on the reverse hereof) contained in this Agreement.

Per: \_\_\_\_\_