

PARKWOOD RV STORAGE LOT AGREEMENT VEHICLE INFORMATION  
Please complete ALL information legibly

RESIDENT NAME: \_\_\_\_\_

RESIDENT ADDRESS: \_\_\_\_\_

VEHICLE TYPE: \_\_\_\_\_

MAKE/MODEL: \_\_\_\_\_

LENGTH: \_\_\_\_\_

COLOR: \_\_\_\_\_

YEAR: \_\_\_\_\_

LICENSE: \_\_\_\_\_

START DATE: \_\_\_\_\_ SPACE (SEE MAP): \_\_\_\_\_

