

Washington, DC 20036

Date:			(202) 223-0127	7	
Owner Name:			Work Number:		
Address:		Cell Number:			
					o.:
Company:				B. Coordinator	•
Applying For:		P		Paid to Operator by: (please select one)	
Monthly Ur		eserved	\$285.00	1	Individually Company
	Make	Model	Year & Color	Plate	State
Vehicle # 1					
Vehicle # 2					
Vehicle # 3					
Payments:			•		
1. Payments are		•	oney order to "Park A	America, Inc." and	are to be mailed to:
Park America - 1200 19th Street NW P.O. Box 75659					
Baltimore, MD 21275-5659					
or payments			rica.net, go to Custon	mers, Washington	DC , 1200 19th St,
			have any questions,		parking office.
			ier's Booth or directly	* *	1
	•			_	oosed on any payment not at parking is not used.
	will be applied in				1 &
5. Owner is res	sponsible for a \$1	5.00 replacement	t fee for the parking	Hang-Tag in case	e of loss or theft.
	duplication are st	rictly prohibited.			
Terms & Con		4 4 6 %	211.0.1	1' 6	4.0.1
 The Operator is not responsible, other than for its willful or grossly negligent acts, for any theft or damage to vehicle. The Operator is not responsible for contents of vehicle, or personal property left therein, under any circumstances. 					
3. Any claim for damage must be made prior to the vehicle leaving the parking facility, no exceptions.					
4. Owner is not entitled to the use of a specific or assigned space unless Owner pays for a Reserved Space,					
first-served		1	4 111	911 12 44 1	
	ing at Owner's exp		ace or other vehicles	Will be subject to b	pooting, relocation,
			ard at all times. Any	vehicle entering the	e facility without
	ess Card must pull	•	•		
			ys, must be informed	_	
			is may be terminated minated for cause. T		time with 10 (ten) days
	•	•			; if not, the full payment must be
	•		g-Tag to the Opera	_	
10. This agreen	nent is not valid ur	iless accepted by	an authorized represe	entative of the Park	America, Inc.
Signature, Vel	hicle Owner:				Date:
					-
Signature, Garage Manager:					Date: