



**OVERNIGHT PARKING  
REQUEST & AUTHORIZATION**

**Tenant Name:** \_\_\_\_\_ **Suite #** \_\_\_\_\_

**Person Making Request:** \_\_\_\_\_ **Phone #** \_\_\_\_\_  
*(Print Name)*

**VEHICLE INFORMATION:**

Year: \_\_\_\_\_ Make & Model: \_\_\_\_\_  
Color: \_\_\_\_\_ License Plate No: \_\_\_\_\_

Date(s) vehicle to be left overnight on level: \_\_\_\_\_ of the garage parking lot:

**From:** \_\_\_\_\_ **To:** \_\_\_\_\_  
*(Limit of 3 days only, no exceptions)*

\_\_\_\_\_  
Tenant Authorization *(Print Name)*

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
TPMC/Landlord's Representative

\_\_\_\_\_  
Date

**THE PROPERTY OWNER AND MANAGEMENT COMPANY ARE NOT RESPONSIBLE FOR VEHICLES PARKED AT  
THE PROPERTY AT ANY TIME, THIS AUTHORIZATION IS NOT INTENDED TO IMPLY OTHERWISE.**

**PLEASE RETURN THIS FORM TO:  
5444 Westheimer, Suite 1500, Houston, Texas 77056  
Phone: (713) 877-1245 Fax: (713) 877-8638**