



Overnight – Short Term Parking Request Form
271 17th Street

Name: _____
Phone#: _____
Company: _____

Date: _____
Building: _____
Floor/Suite: _____

Vehicle Information:

Make: _____ Model: _____
Color: _____ Tag # _____

Vehicle will be left on _____ Level

Reason for Leaving Vehicle:

Length of Time Vehicle to Remain On-Site (must be less than 7 days) _____

Terms:

Any unauthorized vehicles are subject to towing at the owner's expense. If you must park overnight or for a short period of time you must agree to the following terms. **Cushman & Wakefield US Inc., Securitas Security, Lanier Parking and all Atlantic Station affiliates shall not be held liable for any damage, theft, or any irregularity with your vehicle.**

Signatures:

Owner of Vehicle: _____ Date: _____

Accepted By: _____ Date: _____

Title: _____

Please return this form, via fax to 404.898.2510 or tiffany.whitfield@cushwake.com