E.V. Bishoff Co.
Owner Operated Properties
Office Leasing MADE SIMPLE.®
www.evbco.com

33 N. Third Street, Columbus, OH 43215
Phone 614-221.4736 Fax 614.221.4739

Date: _____ rev:5.06.2010

APPLICATION FOR PARKING

Effective Date: _____

Parking Lot Location: Carlyle Parking Lot between Wood and Smithfield Street on 4th Avenue

PERMIT OPTIONS

(Please initial to the left of your option choice)

_____ Permit Option#1 – **Reverse Parking Permit. Parking Privileges from 5:30 PM to 9 AM Monday through Friday and all day Saturday and Sunday.** This is ideal for those of you who live in the City, but commute out of town each day. $99.00 per month

_____ Permit Option #2 – **24/7 Parking Permit. Access to the parking lot 24 hours a day, 7 days a week.** $200.00 per month

_____ Permit Option #3 – **3 Years Parking (36 months). 24/7 Parking Permit. Access to the parking lot 24 hours a day, 7 days a week. $9,792.00 for 3 years.** ($11,520.00 less a 15% discount**)**

_____ Permit Option #4 – **5 Years Parking (60 months). 24/7 Parking Permit. Access to the parking lot 24 hours a day, 7 days a week. $16,320.00 for 5 years.** ($19,200.00 less a 15% discount)

PAYMENT OPTIONS

(Please initial to the left of your option choice)

_____ Payment Option #1: EZ Pay Plan (Fill out and send in the attached EZ Pay Plan Form).

_____ Payment Option #2: Please send Parking Payment for 3 months parking in advance. Please send payment in full to:

Please make checks payable to Spruce Street Properties Ltd. and mail to:
P O Box 3666 , Pittsburgh PA 15230-3666

Parking options 1 and 2: all parking rent is due to be received by no later then the 20th of each month for parking privileges for the following month. A late fee of $10.00 will be assessed any payments received after the 20th of each month or parking privileges can be revoked.

Name: _____

Office Phone #: _____ Home Phone # _____

E-Mail Address:_____ Employer:_____

Home Address:_____

_____

List all vehicles authorized to occupy parking space. All unauthorized cars shall be towed from the lot:

Make/Model Color License #

1._____

USE OF THIS PARKING LOT IS DONE SO AT THE SOLE RISK OF PARKER. PARKING LOT OWNER/MANAGER IS NOT RESPONSIBLE FOR THEFT, VANDALISM, DAMAGE OR HARM OF ANY KIND TO ANY VEHICLE, PERSON AND/OR ANY PROPERTY LEFT IN THE VEHICLE OR ON THE PREMISES. YOUR SIGNATURE BELOW INDICATES YOUR UNDERSTANDING AND AGREEMENT OF THIS PARKING CONDITION

_ _____ _____

Signature Date

_ _____ _____

Signature Date

The above parker acknowledges that any car parked without a authorized parking permit displayed will be towed at their expense. Please forward this Application back to: Joyce Shively, Lease Administrator via Fax #614-221-4739 along with your completed EZ Pay Plan Form or payment or e-mail at jshively@evbco.com