

Address: __

PARKING APPLICATION FORM

MMOBILIÈRE	Type of parking:	□ indoor parking space	□ outdoor parking space	□ lock-up garage
ROMANDE	Wished entry date : _		Price :	
plicant(s):				
APPLICANT: □ Madam □ Sir			CO-APPLICANT: □ Wife □ Husband □ Roommate □ Guarantor	
Last name		Last name		
First name		First name		
Street		Street		
Postcode / City		Postcode / City		
Date of birth			Date of birth	
E-mail		E-mail		
Phone number		Phone number		
Nationality		Nationality		
Establishment permis □ A □ B □ C		Establishment permis □ A □ B □ C		
Occupation		Occupation		
Employer (address, phone nr)		Employer (address, phone nr)		
Gross monthly income		Gross monthly income		
lividual informati	on:			
hicle, type :		Matriculation nr :		
ferences:				
me :			Phone:	
me :			Phone:	
		Diogo attach assiss	of your ID card or passport	_
		Please attach copies	or your 1D card or passport	
servations : This i	nscription is valid six mo	nths. The intermediate ren	tal remains reserved.	
te and place :		Applicant signatu	ıre Co-applicant sigr	ature

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