**THE ISLES HOMEOWNERS ASSOCIATION, INC.**

**C/O CAPITAL REALTY ADVISORS, INC.**

**600 SANDTREE DRIVE #109**

**PALM BEACH GARDENS FL 33403**

**561-624-5888**

**OVERNIGHT PARKING APPLICATION**

CLUBHOUSE FACILITIES TEMPORARY OVERNIGHT PARKING PERMIT

Isles Homeowner Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Home phone:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Isles Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Alt. phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Vehicle Belongs to (circle one) Resident Guest

Visitor’s Name, if applicable: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Vehicle: Yr./Make \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Model\_\_\_\_\_\_ Color\_\_\_\_ Lic.Plate no\_\_\_\_\_\_\_\_\_\_\_State\_\_\_\_\_

Temporary parking request for the following dates: \_\_\_\_\_\_\_\_\_\_\_\_\_\_ Thru\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (7 Nights Max)

**VEHICLE OWNER(S) ACKNOWLEDGEMENT**

I/WE, The Isles resident and the owner of the above described vehicle waive any liability for damage to or loss

of the vehicle while parked as authorized by this permit and agree to indemnify and hold harmless The Isles

Homeowners Association, Inc. for any damages or loss resulting from parking subject to this temporary clubhouse parking permit.

**Resident Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Vehicle Owner Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**ASSOCIATION'S APPROVAL**

APPROVED BY:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Title: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Start Date:\_\_\_\_\_\_\_\_ End Date:\_\_\_\_\_\_\_\_\_