Tuscany Woods Community Association, Inc. Hardship Parking Request Form

Owner Name(s)				
Address				
Phone(s)				
Email(s)				
Family Member(s)				
Phone(s)				
Email (s)		······································		
Current Registered/Permitted	l Vehicles:			
Registered Owner	Make	Model	Color	Plate
(1)				
(2)				
Vehicle Information for Hards	hip Parking Requ	ıest		
Registered Owner	Make	Model	Color	Plate
Reason for Hardship Parking I	Request			
Hardship parking permits are issu term. Permits do not automatica end of each quarter for the Board	lly renew. A new h	ardship-parking ı	•	•
Q1: January-March (Q2: April-June Q3	: July-September	Q4: October-	December
Owner Signature:		Da	te:	
Board Approval Signature:		Da	te:	
Email to: mhatka@ameritecl	nmail.com			
Or Mail to: Ameri-Tech Com	munity Managem	ient		
5434 Grand Blvd.				
New Port Richey,	FL 34652			