

American Tobacco Campus & Diamond View 1 Monthly Access Card and Parking Individual Contract

*Please Print Information
All Sections Must Be Completed*

Name: _____ Badge ID: _____

Address: _____

City: _____ State: _____ Zip Code: _____

ATC Company: _____ TTA _____

Daytime Phone #: _____ Alt Phone #: _____

American Tobacco Campus Hereby Grants monthly parking privileges for _____
vehicle(s) in the **North** Parking Deck.

Lessee Agrees to the following terms:

1. There will be a **\$5.00** charge for replacement of lost Access Cards.
2. Parker must notify the main office upon cancellation of agreement.
3. Parking is only valid for the above named parker.

Additional Terms:

American Tobacco Campus assumes no liability for fire, theft or damage in any case, except through our own negligence. All damage claims must be presented before vehicle is removed from facility. Vehicles should be locked at all times and valuables should not be left in vehicle.

Lessee agrees to abide by any and all regulations pertaining to the use of the facility as may be prescribed from time to time by **American Tobacco Campus**, and further agrees to allow parking of vehicles in any area within the facility designated by **American Tobacco Campus** (unless reserved signage is issued).

This agreement becomes effective on ____/____/____ and may be cancelled by either party.

I agree to all terms set forth in the above contract:

Lessee-Parker _____ Date ____/____/____

Vehicle Information

Please list all vehicles that apply:

Make & Year: _____ Model & Color: _____

State: _____ License Plate: _____

Make & Year: _____ Model & Color: _____

State: _____ License Plate: _____