



REQUEST FOR DISABLED PARKING SPACE

The undersigned Owner requests assignment of a Disabled Parking Space based on the attached documentation issued by the California Department of Motor Vehicles (please attach a photocopy of a placard or other documentation issued by the Department of Motor Vehicles).

Owner understands that assignment of a Disabled Parking Space shall be in lieu of one of Owner's issued parking spaces that is appurtenant to the Residential Unit. Owner further acknowledges that the Disabled Parking Spaces are assigned on a first-come first-served basis and there is no guarantee that a Disabled Parking Space will be available to Owner. The Association will not be held liable if the Association is unable to assign a Disabled Parking Space to a disabled Owner because all designated Disabled Parking Spaces have previously been assigned to other Owners providing evidence of Disabled Status.

Within ten (10) days after receiving this Request for Disabled Parking Space, the Association shall provide a copy of this Request to Owner designating the Disabled Parking Space Number or informing Owner that a Disabled Parking Space is not currently available. If a Disabled Parking Space is not currently available, Owner shall be placed on a waiting list and the Association shall notify Owner within ten (10) days of a Disabled Parking Space becoming available.

Please attach a copy of the proof of disabled status, such as a distinguishing license plate or placard issued by the California Department of Motor Vehicles prior to submission to the Board.

All record Owners (for example, husband and wife/all joint tenants/all tenants in common) of a Unit hereby agree to this request for Disabled Parking Space and all such record Owners must sign this form. Please submit proof of Ownership with this form.

Owner: _____

Owner: _____

Unit No.: _____

Existing Assigned Parking Space No.: _____

Existing Assigned Storage Space No.: _____

FOR OFFICE USE ONLY:

The following Disabled Parking Space is hereby assigned to the above Owner:

Disabled Parking Space No.: _____

A Disabled Parking Space is not available at this time. You have been placed on the waiting list and will be notified by the Association when a Disabled Parking Space is available.

Please send your completed form to the address below:

BREEZA OWNERS ASSOCIATION
1431 Pacific Highway
San Diego, CA 92101
Telephone: (619) 696-7304

