



HARBOR
BAY
BUSINESS
PARK

Overnight Parking Permit Form

Please fill out completely and **FAX** the completed form to the Harbor Bay Business Park Association at **(925) 734-8125**.

Contact Information

Owner of vehicle: _____

Company: _____

Emergency Contact:

Name: _____

Phone Number: _____

Vehicle Information

Make: _____

Model: _____

Year: _____

Color: _____

License Plate Number: _____

Where will the vehicle be parked? (please state the location)

Duration: (please provide the dates)

Reason for overnight parking:
