

EXTENDED PARKING FORM

Tenant Name:	
Car Owner's Name:	
Car Owner's Contact Number:	
Make:	
Model:	
Year:	
License Number:	
Color of Vehicle:	
Email:	
Ramp and Location of Vehicle:	
Dates Vehicle Will Be Left in Ramp:	

Submit to:

Property Management Cushman & Wakefield northlandcentermn@cushwake.com Fax: 855-299-7414





