



# THE TOWERS

## PARKING VOUCHER ORDER FORM



**COMPANY INFORMATION**

**POINT OF CONTACT (must be authorized)**

\_\_\_\_\_  
Company Name

\_\_\_\_\_  
Name

\_\_\_\_\_  
Street Address                      Floor(s)

\_\_\_\_\_  
Signature

\_\_\_\_\_  
City                      State                      Zip

\_\_\_\_\_  
Email Address

\_\_\_\_\_  
Phone Number

\_\_\_\_\_  
Date of Order

**Order Quantities (Please fill out completely)**

DESCRIPTION	# OF INCREMENTS	UNIT COST	=	COST
20 MINUTE VOUCHER*	_____	X \$200	=	_____
1 HOUR VOUCHER*	_____	X \$600	=	_____
ALL DAY VOUCHER**	_____	X \$320	=	_____

\*20 MIN & 1 HOUR VOUCHERS SOLD IN INCREMENTS OF 100

\*\*ALL DAY VOUCHERS MAY BE PURCHASED IN INCREMENTS OF 20

**TOTAL COST =** \_\_\_\_\_

**Method of Payment (Please check one)**

Check Payable to LAZ Parking for pick up at the time of delivery

Credit Card Payment for the card on file

**SUBMIT THIS FORM TO PARKING MANAGER VIA EMAIL: [THETOWERSPARKING@LAZPARKING.COM](mailto:THETOWERSPARKING@LAZPARKING.COM)**

**PLEASE NOTE THERE IS A 24 HOUR GRACE PERIOD FOR LAZ PARKING TO PREPARE AND DELIVER THE VALIDATION ORDERS FROM THE TIME OF ORDERING. IF YOU HAVE SPECIAL NEEDS, QUESTIONS, OR CONCERNS REGARDING THIS ORDER, PLEASE EMAIL THE PARKING MANAGER AT THE ADDRESS ABOVE.**