



THE BANK DOWNTOWN PARKADE

80OFFICE - 8 WEST MARKET STREET, SUITE 300, WILKES-BARRE PA 18701

CHECK PAYMENTS ARE TO BE MADE TO CITI TOWER LLC.
OR THE ONLINE PORTAL THAT WILL BE SUPPLIED

APPLICANT

FIRST NAME

LAST NAME

CELL NUMBER

ADDRESS

CITY

STATE

ZIP

EMAIL

EMPLOYER/PERSONAL

BILLING INFORMATION

SAME AS ABOVE ☐

BILL EMPLOYER ☐

CONTACT NAME

CONTACT NUMBER

EMAIL

ADDRESS

CITY

STATE

ZIP

NOTES

PLEASE COMPLETE

CAR MAKE

UPPER LEVEL
PARKING

\$70

☐

PASS #

CAR MODEL

FULL ACCESS

\$75

☐

STATE

ACTIVATION FEE

\$10

☐

LICENSE PLATE

REPLACEMENT CARD

\$30

☐

ACTIVE DATE

INSUFFICIENT
FUNDS

\$30

☐

☐ YES
☐ NO

DE-ACTIVED DATE/RETURN

THIS PARKING PASS LICENSES THE HOLDER TO PARK ONE VEHICLE IN THE PARKADE AT THE HOLDER'S RISK. PLEASE LOCK YOUR VEHICLE, AS THE LICENSOR HEREBY DECLARES IT IS NOT RESPONSIBLE FOR FIRE, THEFT, DAMAGES OR LOSS OF SUCH VEHICLE OR ANY ARTICLE LEFT THEREIN.

THIS IS TO CERTIFY THAT PASS #_____ HAS BEEN ISSUED TO THE ABOVE-NAMED APPLICANT AGREES TO A ONE TIME \$10 ACTIVATION FEE AND MONTHLY CHARGES. IF THE CARD IS LOST OR STOLEN A NEW CARD WILL BE REQUIRED AT THE LISTED FEES. APPLICANT MUST RETURN THE KEY CARD TO END THE AGREEMENT OR MONTHLY BILLING WILL CONTINUE.

I HEREBY CONFIRM THE VERACITY AND COMPLETENESS OF MY RESPONSES, ACKNOWLEDGING THAT PROVIDING INCORRECT INFORMATION MAY RESULT IN THE TERMINATION OF AGREEMENT.

DATE

SIGNATURE