

GALLERIA OVERNIGHT PARKING FORM

Although Galleria Property Management prefers that neither vehicles nor personal property be left on the premises overnight, we understand that it is occasionally necessary to do so. Childress Klein will be as accommodating as possible.

Though we provide security to the Galleria, we do not assume responsibility for any damage or theft which may occur to your property. It is, however, very helpful for us to be informed when a vehicle will be left in the parking deck overnight or for a period of days.

If you will be leaving your car in the Galleria parking decks overnight or during the weekend, please fill out the following information and sign below. ****If you intend to leave your vehicle for an extended period of time, (three or more days) you will need prior approval from Security Management.** This information will alert Security of your vehicle; however, neither Childress Klein nor Security assumes liability for your vehicle. By signing below you are indemnifying Childress Klein and AlliedBarton Security Services from any claims or demands of whatever kind or nature which may arise from leaving your vehicle or personal property on the premise, waive any rights you may have against these Entities, and covenant not to sue the Entities for any damages allegedly resulting there from:

BUILDING: **PARKING LEVEL:** (Circle the Building # and the Parking level where you'll be parked)

100			3	4	West Lot				(4 is the top level)
300	A	B	C	D	E	F	G		(A is top – G is bottom)
400	A1	A	B	C	D	E	F		(A1 is top– F is bottom)
600	1	2	3	4					(1 is bottom – 4 is top)
700/INPO	A	B	C	D					(A is bottom – D is top)

DATE TO BE LEFT: _____ DATE TO BE RETRIEVED: _____

****If vehicle is to be parked for three or more days, approval was granted by:** _____

VEHICLE MAKE: _____ MODEL: _____ COLOR: _____

TAG # _____ STATE: _____ OWNER'S NAME: _____
(PLEASE PRINT OWNER'S NAME)

PHONE NUMBER: _____ EMPLOYED BY: _____
(PLEASE PRINT COMPANY NAME)

VEHICLE OWNER'S SIGNATURE: _____

Is the vehicle owner a late night / overnight worker who regularly parks here overnight?
YES or NO (CIRCLE ONE)

CONTACT PERSON **WHO WILL HAVE CAR KEYS** IN CASE OF EMERGENCY:

NAME: _____ PHONE NUMBER: _____

Please fax the completed form to: GALLERIA SECURITY OPERATIONS AT 770-859-1285

Officer completing or receiving this form: (PRINT NAME) _____