

Museum Park Lofts Condominium Association

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Bicycle Information Form

Please complete the attached form if you would like to request an additional bike space. All units have one assigned bike space that is numbered according to their unit.

Date: _____

Unit # _____

Name: _____

Phone: _____

My household would like _____ additional bicycles spaces. The following is a description of my bicycle(s) that I would like stored:

Please bill my assessment ledger \$25 per space.

Signature