

**Date:** [Insert Date]

**To:** [Recipient Name/Employee Name]

**ID Number:** [Insert ID Number]

**Department:** [Insert Department]

**Subject: Allocation of Designated Motorcycle Parking Space**

Dear [Recipient Name],

We are pleased to inform you that your request for a motorcycle parking permit has been approved. You have been allocated a designated parking space within the facility premises.

**Allocation Details:**

- **Parking Zone:** [Insert Zone Name/Area]
- **Space Number:** [Insert Space Number]
- **Permit Number:** [Insert Permit Number]
- **Effective Date:** [Insert Start Date]

**Terms and Conditions:**

- The permit must be clearly displayed on the motorcycle at all times.
- Parking is only permitted within the specific space number assigned above.
- The speed limit within the parking area is [Insert Speed, e.g., 10 mph].
- The management is not responsible for any loss, theft, or damage to the vehicle.
- This allocation is non-transferable and may be revoked if site rules are violated.

Please acknowledge receipt of this letter and the parking permit by signing below and returning a copy to the [Insert Department Name, e.g., Facilities Office].

Sincerely,

[Your Name/Signature]

[Your Title]

[Company Name]

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**Acknowledgment:**

I, [Recipient Name], acknowledge the receipt of the parking permit and agree to abide by the terms and conditions mentioned above.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_