

VEHICLE REGISTRATION FORM

Unit #: _____

Unit Owner or Lessee Name: _____

Vehicle Owner's Name: _____

Vehicle 1 Make: _____ Model: _____

Space # Year: _____ Color: _____

_____ Tag # _____ State: _____

Vehicle Owner's Name: _____

Vehicle 2 Make: _____ Model: _____

Space # Year: _____ Color: _____

_____ Tag # _____ State: _____

Vehicle Owner's Name: _____

Vehicle 3 Make: _____ Model: _____

Space # Year: _____ Color: _____

_____ Tag # _____ State: _____

Note: Vehicles must be parked in assigned space(s) only.

Any unauthorized vehicles are subject to being towed at the vehicle owner's expense.