**Vehicle Registration Form**

**PLEASE COMPLETE ALL OF THE INFORMATION IN THE SPACES PROVIDED.**

Name:

Unit Address:

Applicant is: Owner Renter Email Address

Phone: (h) (w) (c)

**VEHICLE INFORMATION**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Vehicle** | **Year, Make, Model of Vehicle** | **Color** | **License Plate #** | **State** |
| **#1** |  |  |  |  |
| **#2** |  |  |  |  |
| **#3** |  |  |  |  |

# ABOVE VEHICLE(S) REPLACE THE FOLLOWING VEHICLE(S) (if applicable)

|  |
| --- |
|  |
|  |

Signature Date

**Return completed form to:** Harbor Watch Condominium Association at the address, fax number or email address below.