

Vehicle Registration Form

| Unit Address: | | | |
|------------------------------|---|---------------------|-------------------|
| Person Completing This Form: | | | |
| Applicant Is (Check One): | The Owner | A Renter | |
| Phone: (h) | (w) | (c) | |
| | VEHICLE INFO | <u>ORMATION</u> | |
| YEAR/MAKE OF VEHICL | E COLOR | LICENSE PLATE # | STATE |
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| SIGNATURE | | DATE | |
| 2 V | %O THE SELECT GR 224 VIRGINIA BEAC TRGINIA BEACH, V | CH BLVD., SUITE 201 | VNERS ASSOCIATION |