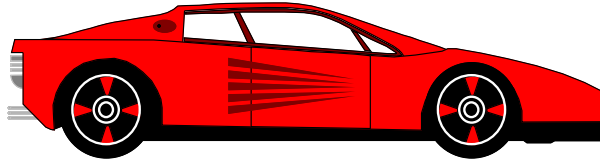


# BEACH BAY CONDOMINIUM ASSOCIATION

## VEHICLE REGISTRATION FORM



Please complete all of the information in the spaces provided.

Unit Address: \_\_\_\_\_

Person Completing This Form: \_\_\_\_\_

Applicant Is: \_\_\_\_\_ The Owner \_\_\_\_\_ A Renter (Check One)

Phone: (h) \_\_\_\_\_ (w) \_\_\_\_\_ (c) \_\_\_\_\_

### Vehicle Information

YEAR/MAKE /MODEL OF VEHICLE	COLOR	LICENSE PLATE #	STATE

\_\_\_\_\_  
SIGNATURE

\_\_\_\_\_  
DATE

**Please return completed form to The Select Group at the address or fax number provided below or email to [jstrickland@theselectgroup.us](mailto:jstrickland@theselectgroup.us)**

c/o The Select Group, 2224 Virginia Beach Blvd., Suite 201, Virginia Beach, Virginia 23454  
(757) 486-6000 fax: (757) 486-6988 email: [vdurham@theselectgroup.us](mailto:vdurham@theselectgroup.us) website: [www.theselectgroup.us](http://www.theselectgroup.us)