

1008 Westover Condominium Association

PET REGISTRATION FORM

One pet limit 45 lbs. Aquariums limit to 25 gallon tanks

If you do not own a pet, please check here ____, sign, date, and return to The Select Group, Inc.

Owner / Residents Name: _____

Unit Address: _____

Phone: (h) _____ (w) _____ (c) _____

I Own _____ Cat(s) it (they) are _____ indoor _____ outdoor (CHECK ONE)

Cat(s) Name(s): _____

Description (Size, Color, Breed, Distinguishing Marks/Characteristics): _____

Date(s) of Rabies Vaccination(s): _____

Tag Number(s) & Date(s) of Issuance: _____

I Own _____ Dog(s) it (they) are _____ indoor _____ outdoor (CHECK ONE)

Dog(s) Name(s): _____

Description (Size, Color, Breed, Distinguishing Marks/Characteristics): _____

Date(s) of Rabies Vaccination(s): _____

Tag Number(s) & Date(s) of Issuance: _____

I HAVE READ THE PET RULES AND REGULATIONS OF THE ASSOCIATION AND AGREE TO COMPLY WITH THE RULES AS THEY PERTAIN TO PET OWNERSHIP.

SIGNATURE

DATE

**Return completed form to The Select Group at the address or fax number provided below
or email to mromero@theselectgroup.us**

**c/o The Select Group, Inc., 2224 Virginia Beach Blvd., Suite 201, Virginia Beach, VA 23454
(757) 486-6000 fax: (757) 486-6988 email: rblankenship@theselectgroup.us website: www.theselectgroup.us**