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**BAY BEACH CONDOMINIUM ASSOCIATION**

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**Vehicle Registration Form**

Please complete all of the information in the spaces provided. There is no on street parking in your community.

Owner: \_\_\_\_\_

Tenant (If Applicable): \_\_\_\_\_

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

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

Email: \_\_\_\_\_

.....

**VEHICLE INFORMATION**

<b>YEAR/MAKE MODEL OF VEHICLE</b>	<b>COLOR</b>	<b>LICENSE PLATE #</b>	<b>STATE</b>

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

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