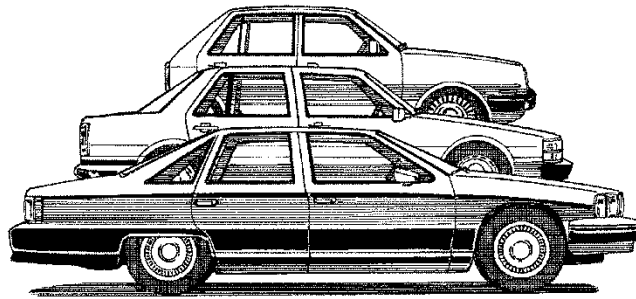




# Witchduck Lake Condominium Association



## 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	COLOR	LICENSE PLATE #	STATE

\_\_\_\_\_  
SIGNATURE

\_\_\_\_\_  
DATE

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