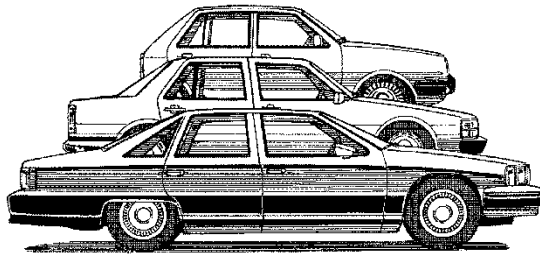




A Haymark Community

COMMUNITY ASSOCIATION, INC. 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

Return completed form to The Select Group at the address or fax number below
or email to afleetwood@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: rphippins@theselectgroup.us or visit us at www.theselectgroup.us