

WILLOW POND at BREATHWAITE PLACE

Condominium Association

VEHICLE REGISTRATION FORM

Please complete all of the information in the spaces provided.

Unit Address: _____

Person completing application: _____

Applicant is (Check One): _____ The Owner _____ A Renter

Phone: (H) _____ (W) _____ (C) _____

Email: _____

PARKING IS RESTRICTED TO THE DRIVEWAY OR GARAGE OF YOUR UNIT ONLY

| 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 afleetwood@theselectgroup.us