Cedar Hollow Association, Inc. Unit Owner Vehicle Registration Form

Unit O	wner Name:				
Tenant	s Name(If Applicat	ole):			
Addres	ss:				
Home	Phone:				
Your A	ssigned spaces:				
Vehicle	es Information:				
1.	Year:	Make:	Model:	Color:	_
	License Plate:	State:	_		
2.	Year:	Make:	Model:	Color:	
	License Plate:	State:	_		
		aces to another unit ow			
1.	Year:	Make:	_ Model:	Color:	
	License Plate:	State:	-		
2.	Year:	Make:	Model:	Color:	_
	License Plate:	State:	_		
	Unit Owner's Sig	gnature/Date	 Tenant's Signature/Date		