

DATE: ____/____/____



Watergate Vehicle Registration Form

Name: _____ Ph #: _____ Alt. Ph #: _____

Address: _____ Unit #: _____ City: _____ State: _____ Zip: _____

Alternate Address: _____ City: _____ State: _____ Zip: _____

Make: _____ Model: _____ Color: _____ Year: _____

License Plate #: _____ State: _____ Expiration Date: ____/____/____

Deeded Parking Space #: _____

Please check if the registration is for:

Automobile Motorcycle

Commercial Vehicle

Boat/Trailer

Boat Registration #: _____ Exp. Date: ____/____/____

Trailer Plate #: _____ Exp. Date: ____/____/____

Check if vehicle is located in 28th Avenue fenced lots.

A Form must be filled out for EACH vehicle, motorcycle, boat/trailer.

Must show valid driver's license with current address to obtain parking permit sticker for vehicle and/or trailer.