

**BEACON HILL CONDOMINIUM ASSOCIATION
PARKING REGISTRATION**

Unit Address _____ Date _____

Owner Name(s) _____

Tenant Name(s) _____

Make & Model of Vehicle (1) _____

License Plate # _____ Year of Vehicle _____ Color _____

Owner of Vehicle _____ Telephone # _____

Make & Model of Vehicle (2) _____

License Plate # _____ Year of Vehicle _____ Color _____

Owner of Vehicle _____ Telephone # _____

Make & Model of Vehicle (3) _____

License Plate # _____ Year of Vehicle _____ Color _____

Owner of Vehicle _____ Telephone # _____

\$2 per vehicle. No Cash. Check or Money Order made out to Beacon Hill or VSCA.

TO BE FILLED OUT BY MANAGEMENT OFFICE:

(1) Vehicle #1 Parking Permit # Issued _____ \$2.00 _____

(2) Vehicle #2 Parking Permit # Issued _____ \$2.00 _____

(3) Vehicle #3 Parking Permit # Issued _____ \$2.00 _____

Total \$ _____