

**KEENE MILL OAKS ASSOCIATION
2017 VEHICLE REGISTRATION FORM**

PROPERTY ADDRESS: _____

OWNER INFORMATION

NAME(S): _____

MAILING ADDRESS (if different from property address): _____

TELEPHONE # (DAY) _____ (EVENING) _____

EMAIL ADDRESS: _____

RENTER/TENANT INFORMATION

(A COPY OF YOUR CURRENT LEASE MUST ACCOMPANY THIS APPLICATION)

NAME(S): _____

TELEPHONE # (DAY) _____ (EVENING) _____

EMAIL ADDRESS: _____

VEHICLE INFORMATION

(A COPY OF YOUR VIRGINIA VEHICLE REGISTRATION MUST ACCOMPANY APPLICATION)

VEHICLE #1

MAKE: _____ MODEL: _____ YEAR: _____

COLOR: _____ LICENSE (State/#): ____ / _____

VEHICLE #2

MAKE: _____ MODEL: _____ YEAR: _____

COLOR: _____ LICENSE (State/#): ____ / _____

**APPLICANT(S) HEREBY ACKNOWLEDGES RECEIPT OF THE PARKING RULES AND REGULATIONS
OF THE KEENE MILL OAKS HOW AND AGREES TO COMPLY WITH THE REGULATIONS.**

SIGNATURE

DATE

SIGNATURE

DATE

FOR ADMINISTRATIVE USE ONLY

Permit # _____ Permit # _____ Visitor Permit # _____ Date _____