

ROGERS BAY PROPERTY OWNERS ASSOCIATION



TRAILER DATA COLLECTION FORM

PROPERTY OWNER INFORMATION

Name:

Mailing Address:

Account Number *(Found on your quarterly invoice)*:

LOT INFORMATION

Lot Number:

Lot Section:

Rogers Bay Address:

TRAILER INFORMATION

Trailer Model:

Year Manufactured:

Date Unit Was Placed on Lot:

Date Trailer Was Last Removed From Lot:

Date Trailer Was Returned to Lot:

REGISTRATION INFORMATION

State Where Trailer is Registered:

County of Registration:

License Tag Number:

Date Registered:

Date Registration Expires:

RETURN COMPLETED FORMS TO:

**ROGERS BAY POA
P.O. Box 517
SNEADS FERRY, NC 28460**