

VEHICLE REGISTRATION FORM

Tenant Name: _____

Make of vehicle: _____

Model of vehicle: _____

Color of vehicle: _____ License Plate Number: _____

Registered to: _____

Copy of Registration: _____ Copy of Insurance: _____

Tenant Name: _____

Make of vehicle: _____

Model of vehicle: _____

Color of vehicle: _____ License Plate Number: _____

Registered to: _____

Copy of Registration: _____ Copy of Insurance: _____

I understand that any vehicle that is at my residence on a regular basis and is found to be an unauthorized guest, could be towed at my expense, and I will be issued a Lease Violation for Unauthorized Persons.

Tenant Signature/Date

Tenant Signature/Date

OFFICE USE ONLY:

SSMHC Parking Tag (Vehicle #1): _____ Date Issued: _____

SSMHC Parking Tag (Vehicle #2): _____ Date Issued: _____

Staff Initials: _____

