

**COTTAGE CREEK CONDOMINIUM ASSOCIATION
VEHICLE REGISTRATION FORM
[one (1) vehicle per unit]**

Date: _____

Unit #: _____

Assigned Parking Space #: _____

Resident Name: _____

Mailing Address: _____

Home Phone: _____

Cell Phone: _____

Email Address: _____

Vehicle Make: _____

Vehicle Model: _____

Vehicle Year: _____

Vehicle Color: _____

Vehicle License Plate: _____

Thank you for the information. Registering your vehicle is very important to ensure the safety of the complex.

Please complete and return this form to:

INTEGRA Condominium Association Management, Inc.

P.O. Box 31936, Bellingham, WA 98228

Phone: 360-656-5091 FAX: 360-656-5093 Email: integra@integra2183.com