

**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](mailto:integra@integra2183.com)