GROSVENOR PARK TOWNHOUSECONDOMINIUM PARKING REGISTRATION APPLICATION

Please complete this form, provide a copy of your vehicle(s) registration, and submit them to Abaris Realty via:

EMAIL Shireen Ambush sambush@abarisrealty.com	FAX Shireen Ambush 301-468-0983	<u>MAIL</u> Shireen Ambush 7811 Montrose Rd, Suite #110 Potomac, MD 20854
* <u>Important</u> : Any incomplete applica proper documentation are submitted.	tion will be denied permits. Please ma	ske sure all fields are filled out and
Name of Applicant:		Owner Renter
Address:		
Home Phone:		
E-Mail Address (Required):		
*** <u>All Renters Must Provide the F</u>	ollowing Information:	
Homeowner's Name:		
Homeowner's Phone:		
Homeowner's Email:	_	
Homeowner's Address:		
before a parking permit will be iss		
** <u>Important</u> : Emails provided will b	e used for communication from the Boo	ard and community. Please notify Abaris

Realty of any email changes.

Vehicle #1	Vehicle #2	Vehicle #3
Make:	Make:	Make:
Model:	Model:	Model:
Year:	Year:	Year:
Color:	Color:	Color:
Tag #:	Tag #:	Tag #:
Expiration:	Expiration:	Expiration:
State:	State:	State:

Please submit the <u>Maryland Vehicle Registration</u> for each vehicle you wish to obtain a parking permit for with your application.

I, hereby certify that (1) my parking permit will be displayed on the driver's side rear window of my vehicle, (2) that I have received and will abide by the attached Parking Rules & Regulations of the GPTC community, and (3) that the information I have listed on this form is true and accurate.						
Applicant Signature		Date	Date			
BELOW IS FOR OFFICE USE ONLY:						
Date Issued:	<i>Permit #1:</i>	<i>Permit #2:</i>	Permit #3:			