FORREST HILL CONDOMINIUM VEHICLE REGISTRATION

RESIDENT'S NAME(s):_	
ADDRESS:	
	1 st VEHICLE:
1. MAKE OF VEHICLE:_	
2. MODEL & YEAR:	
3. COLOR OF VEHICLE:	
4. LICENSE PLATE #:	
	2 nd VEHICLE:
1. MAKE OF VEHICLE:	
2. MODEL & YEAR:	
3. COLOR OF VEHICLE:_	
4. LICENSE PLATE #:	
	3 rd VEHICLE:
1. MAKE OF VEHICLE:	
2. MODEL & YEAR:	
3. COLOR OF VEHICLE:_	
4. LICENSE PLATE #:	

Return by mail or fax to: Crofton Associates, Inc. 111 Marsh Road Pittsford NY 14534 Fax: 585-248-3666