

## VEHICLE REGISTRATION FORM

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Resident's Name: \_\_\_\_\_

Vehicle Owner's Name  
(If different than Resident's Name) \_\_\_\_\_

Unit/Suite #: \_\_\_\_\_ Telephone #: \_\_\_\_\_

Email Address: \_\_\_\_\_

Unit Occupancy: \_\_\_\_\_ Owner/ Resident/ Tenant

Vehicle Make \_\_\_\_\_

Model \_\_\_\_\_

Year \_\_\_\_\_

Colour \_\_\_\_\_

License Plate No. \_\_\_\_\_

Please attach a recent photo of the vehicle with number plate when submitting form to the Management office or you may send an email of the photo to the Management Office.

**Note: Vehicle details can only be updated when a copy of the ownership/ Lease is on file and the resident's information forms have been filled out and submitted.**

Signature of Owner: \_\_\_\_\_ Date: \_\_\_\_\_

Please complete and return this form to Management Office in person or via the concierge desk or by email [shanta.sapkota@melbournepm.ca](mailto:shanta.sapkota@melbournepm.ca).