

**BELAFLORA CONDIMINIUM ASSOCIATION, INC.**  
**GARAGE REGISTRATION FORM**

This Garage Registration Form is in reference to **Unit No. G-** \_\_\_\_\_ **Condominium Unit Owned – No.** \_\_\_\_\_

- (a) Full name(s) of Owner(s) of Units:  
Name: \_\_\_\_\_  
Name: \_\_\_\_\_
- (b) Owner's physical living address: \_\_\_\_\_  
\_\_\_\_\_
- (c) Owner's employment name/address: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
- (d) Owner's phone numbers:  
Home Phone(s): \_\_\_\_\_  
Business Phone(s): \_\_\_\_\_  
Cellular Phone(s): \_\_\_\_\_
- (e) Owner's email address: \_\_\_\_\_
- (f) Address for notice purposes if other than (b) above:  
\_\_\_\_\_  
\_\_\_\_\_
- (g) Full name(s), last 4 digits of social security number(s) and year(s) of birth of owner(s), (attach additional page if necessary):  
Name: \_\_\_\_\_ SS# \_\_\_\_ - \_\_\_\_ - \_\_\_\_ YOB \_\_\_\_\_  
Name: \_\_\_\_\_ SS# \_\_\_\_ - \_\_\_\_ - \_\_\_\_ YOB \_\_\_\_\_
- (h) Automobiles of occupant(s) (Maximum of two)  
License Number: \_\_\_\_\_  
Make/Model/Year/Color: \_\_\_\_\_  
  
(Attach photo of vehicle to this form)  
  
License Number: \_\_\_\_\_  
Make/Model/Year/Color: \_\_\_\_\_  
  
(Attach photo of vehicle to this form)

Owner(s) acknowledge has/have received a copy of the Condominium Documents.

\_\_\_\_\_  
Owner

\_\_\_\_\_  
Co- Owner

Date: \_\_\_\_\_

Date: \_\_\_\_\_

**RETURN THIS FORM TO:**  
Belaflorea Condominium Association, Inc., 5302 East Van Buren Street, Phoenix, Arizona 85008.