



Miami Lakes Loch Isle Homeowners' Association

Resident Vehicle Information

Owner

Address: _____

First Name: _____ Last Name: _____

First Name: _____ Last Name: _____

First Name: _____ Last Name: _____

Renter

Address: _____

First Name: _____ Last Name: _____

First Name: _____ Last Name: _____

First Name: _____ Last Name: _____

Phone Number(s):

_____	<input type="checkbox"/>	Home	<input type="checkbox"/>	Cell	<input type="checkbox"/>	Work
_____	<input type="checkbox"/>	Home	<input type="checkbox"/>	Cell	<input type="checkbox"/>	Work
_____	<input type="checkbox"/>	Home	<input type="checkbox"/>	Cell	<input type="checkbox"/>	Work

Email Address: _____

COMMERCIAL VEHICLES NOT PERMITTED

Vehicle # 1 Make & Model _____ Tag # _____

Vehicle # 2 Make & Model _____ Tag # _____

Vehicle # 3 Make & Model _____ Tag # _____