Cottages at Cedar Ridge Homeowners Association, Inc.

C/O VISION COMMUNITY MANAGEMENT 16625 S Desert Foothills Pkwy Phoenix, AZ 85048 (480) 759-4945 FAX (480)759-8683

Email: cottagescedarridge@wearevision.com

PARKING PASS FORM

| Homeowner Name:Date: | | | | | | |
|---|---|---|--|---|----------------------------------|--|
| Property Address: | | | Lot #: | Lot #: | | |
| Phone Numb | oer: () | Email: _ | | | | |
| Vehicle Info | rmation: | | | | | |
| | Vehicle Make | Model | | License # | | |
| | | | | | | |
| (If Applicable) | | | | | | |
| I would like to authorize the following Tenant/Property Manager to receive the Parking Pass | | | | | | |
| Tenant Name: | | | | | | |
| Property Management Name/Address: | | | | | | |
| | | | | | | |
| Homeowner Signature: | | | Date: | | | |
| parking spot NO STRI Flagstaff reg | s on their driveway. EET PARKING DURING ulations which limits | Each home has been i S SNOW EVENTS IS PEI street parking from N | MAINTAINED. All ownssued 1 street parking RMITTED DUE TO PLOTO NEW MARCH 1 to March g company. The cost of the cos | pass for NON-SNOW WING. This mirrors th h 31st each year. For I | DAYS ONLY. e City of replacement | |
| (OFFICE USE ONLY) | | | | | | |
| | Date Mailed | Check/Money Order | Initials/Notes | Pass Numbers | | |