

CALIFORNIA GARDENS VEHICLE IDENTIFICATION FORM

Unit Address _____

Owner's current address (if different) _____

Home Phone # _____ Work # _____ Cell # _____

Unit Occupied by:

Name _____

Name _____

Home Phone # _____ Work # _____ Cell # _____

Vehicle Information:

Make _____ Model _____ Year _____ License Plate # _____

Make _____ Model _____ Year _____ License Plate # _____

Make _____ Model _____ Year _____ License Plate # _____

I, _____ the owner of the property at _____, understand that my tenant needs to abide by the Parking Rules and the conduct of tenants, guests and invites is my responsibility as owner of the property according to the Association Governing Documents.

**Owner's Signature _____ Date _____

**Tenant's Signature _____ Date _____

VOTE ON PURSUING EARTHQUAKE INSURANCE FOR THE ASSOCIATION

___ I WOULD like the Board to pursue Earthquake insurance for the Association.

___ I WOULD NOT like the Board to pursue Earthquake insurance for the Association.