

# CANNON RIDGE HOMES ASSOCIATION PARKING PERMIT APPLICATION

Owner Occupied \_\_\_\_\_ Tenant \_\_\_\_\_

CRHA ADDRESS \_\_\_\_\_ LOT # \_\_\_\_\_

I. Owner

Name \_\_\_\_\_

Address (If different from above CRHA address):

\_\_\_\_\_  
\_\_\_\_\_

Phone (home) \_\_\_\_\_ (work) \_\_\_\_\_

II. Tenant Name and Telephone Number: If you own, but do not live in CRHA, please fill in the information below. Use the reverse side if more space is needed. (This information will allow us to contact the tenants if necessary.)

1. \_\_\_\_\_ Home # \_\_\_\_\_

2. \_\_\_\_\_ Alternate # \_\_\_\_\_ ]

3. \_\_\_\_\_

III. Vehicle Descriptions and License \*(List all vehicles that will use the CRHA parking permits.)

1. \_\_\_\_\_

2. \_\_\_\_\_

3. \_\_\_\_\_

If your vehicle has out of state tags or a sticker other than Manassas City decal, use the reverse side or attach a separate explanation.

IV. Emergency Contact

Name: \_\_\_\_\_ Phone Number: \_\_\_\_\_

V. Certification: I am the owner or managing agent of the lot identified on this page. I certify that the information listed is accurate and the residents listed are full-time residents of the lot.

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

**\*PLEASE RETURN THE COMPLETED APPLICATION TO**

**SEQUOIA MANAGEMENT CO., 13998 PARKEAST CIRCLE, CHANTILLY VA 20151 OR FAX 703.968.0936**

**REMINDER: DEADLINE TO DISPLAY NEW PARKING PERMITS IS AUGUST 31, 2007**

Reserved	Visitor	Reserved	Visitor	Other
#R	#V	#R	#V	#
Issue Date	Issue Date	Issue Date	Issue Date	Issue Date
Void Date	Void Date	Void Date	Void Date	Void Date
Replaced Date	Replaced Date	Replaced Date	Replaced Date	Replaced Date
#R	#V	#R	#V	#

Comments: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_