POINTE COMMUNITY ASSOCIATION c/o VISION Community Management 16625 S. Desert Foothills Parkway Phoenix, AZ 85048 phone: 480-759-4945 fax: 480-759-8683 pointecommunity@wearevision.com LOT C VEHICLE REGISTRATION LONG - TERM PARKING *Vehicle Description: _____ Make Model Year *Registration: ______ Attach copy of Registration. Plate Number State *Insurance: ______ Attach copy of Declarations page. Company Policy Number _____ *Owner:_____ *Name * Pointe Address/ Lot #_____ *Phone Number Email address * Required Information NOTE: ALL REQUIRED INFORMATION. REGISTRATION. AND INSURANCE FORMS ALONG WITH CHECK FOR \$25.00 TO POINTE COMMUNITY ASSOCIATION FOR FIRST MONTH'S FEE MUST BE RECEIVED BEFORE VEHICLE CAN BE ASSIGNED A NUMBERED PARKING PASS. PLEASE NOTE THAT THE FEE IS \$25.00 PER MONTH. THE PARKING PASS STICKER MUST BE VISIBLY DISPLAYED AT ALL TIMES. For Association Use Only: Completed Lot Registration Form Vehicle Registration Copy ____ Insurance Declarations Page Receipt & authorization letter sent Space # assigned Payment Record: Invoice sent: _____ Invoice sent: _____ Payment received: _____ Payment received: _____ Invoice sent: ______ Invoice sent: ______ Payment received: _____ Payment received: _____ OTHER ACTION: _____

