

TOWN SHORES OF GULFPORT #212
THE DIPLOMAT CONDOMINIUM ASSOCIATION

DIPLOMAT VEHICLE REGISTRATION

Date _____ Parking Space # _____

Name _____ Unit # _____

Vehicle Make _____/Model _____ Year _____

Tag: State _____ Tag: Number _____

Owners Phone Number (_____) _____ - _____

Please fill out the information below if you leave the vehicle at the Diplomat while you are gone.

Person with extra keys _____

Their Phone Number (_____) _____ - _____

I have granted _____ permission to use my parking space. (Circle one: Annually or Seasonally)

Please provide their phone number (_____) _____ - _____

Note: Your unit's numbered parking decal should be displayed in this vehicle while utilizing the parking space.