

**STONEHURST HOMEOWNERS ASSOCIATION
RESIDENT PARKING DECAL FORM**

(Visitor's passes are required for overnight guests or routine visitors and are requested on a different form that is available from the Secretary or on the website.)

Residency: Owner _____ Renter _____

Vehicle No. 1

Vehicle No. 2

Name: _____

Address: _____

Telephone: _____

Email: _____

Vehicle Make: _____

Model: _____

Year/Color _____

License Plate # : _____

State Registered In: _____

Signatures: (of owner(s) of the car(s) needing registration above)

Vehicle Owner: _____

(If applicable) please remove the following car from our records:

License Plate Number: _____ Decal Number: _____

To Be Filled In By Secretary:

Decal Number: _____

Date Issued: _____

SHA Representative: _____

*Please return this form to Jo Eanes:
Via email: sectreas@stonehursthoa.com
Or hard copy: 9223 Bailey Lane*