



Homeowner/Resident Parking Registration Form

All Homeowners/Residents of the Carriages at Briargate Homeowners Association are required to register their vehicles.

#1 Vehicle Information

Parking No. _____
(for office use only)

Make: _____ Model: _____

Year: _____ Color: _____ 2 Door 4 Door

License Plate No. (including State) _____
Example: CO 451-ZYQ

VIN # _____

#2 Vehicle Information

Parking No. _____
(for office use only)

Make: _____ Model: _____

Year: _____ Color: _____ 2 Door 4 Door

License Plate No. (including State) _____
Example: CO 451-ZYQ

VIN # _____

Homeowner/Resident Information

Name: _____

Address: _____

Signature: _____ Date: _____

Please return completed form within thirty (30) days by one of the following means:

Return this Form to:

Hammersmith Management Inc., 1155 Kelly Johnson Blvd., Suite 495, Colorado Springs CO 80920

Phone: 719-389-0700 Fax: 719-328-0576 or scan, attach, and email to

clientservices@ehammersmith.com