

Date issued: _____ Permit: _____ No.: _____



Guest Parking Registration Form

All Homeowners/Residents of the Carriages at Briargate Homeowners Association are required to register their guest vehicles while parking for more than 48 Hours.

Homeowner/Resident Information

Name: _____

Address: _____

Phone Number: _____

Signature _____

Guest Information

Name: _____

Dates Vehicle will be parked in Carriages at Briargate: Beginning and End Date:

Guest Vehicle Information

Make: _____

Model: _____

Year: _____

Color: _____ Circle either 2-Door or 4-Door

License Plate No. (including State): _____

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
communitycare@ehammersmith.com