Valley View Owners Association, Inc Parking Sticker Request

| UNIT #: | |
|--|--|
| NAME: | |
| PHONE: | |
| | |
| CAR #1 | |
| MAKE: | |
| MODEL: | |
| YEAR: | |
| COLOR: | |
| LICENSE PLATE #: | |
| | |
| CAR #2 | |
| MAKE: | |
| MODEL: | |
| YEAR: | |
| COLOR: | |
| LICENSE PLATE #: | |
| Please fill out all items on this form and return to: Valley View office located in the center of the complex. You may use the mail slot if no one is in the office. | |
| You must have a current vehicle registration to obtain a new parking sticker. | |
| For Office Use: | |