Form No.: Control No.:



VEHICLE STICKER APPLICATION

Please check: New Application					
Renewal					
Submit the following together with the position official Receipt (OR) Certificate of Registration (CR)	payment:				
This is to request for the issuance of described in the attached copy (ies) of hereby agrees to indemnify and hold the property management personnel free from and damages that may occur arising from and/or use of the sticker(s), whether woundersigned applicant understands and acceptance of liability on the part of the	of the Cerne Condomrom any liad om/or on the posterior on the posterior the posterior the posterior condenses the	tificate(s) of I ninium Corpora ability, cost or the occasion of premises of the dges that the i	Registrat tion, its expense the oper e condor ssuance	ion. The udirectors, of for any untation of the minium proj	undersigned applicant fficers, managers and oward incident, injury said motor vehicle(s) lect or otherwise. The
The undersigned applicant hereby bind authority or behalf with respect to the pertinent rules and regulations of Condisale or disposal or any manner of transfithe undersigned commits to inform the and not later than the date of sale or osticker(s) issued corresponding thereto sticker issued to such motor vehicle(s).	e motor voominium Cer of owner administration of owner administrations of the contraction	ehicle(s) subjectorporation as earship of the mation of the Cotransfer of ow	ect of the stated in notor veh ndominity nership	is application the House iicle(s) subjuit the Corporation the purpers the purp	on to comply with all Rules. Further, upor ect of this application, tion in writing prior to pose of cancelling the
The undersigned hereby certifies that a	ll informati	on declared he	erein are	true and co	orrect.
Name (Last Name, First Name, M.I.)		Tower & U	nit No.	Slot No.	Tel No.
Type of Vehicle		Plate No./ Conduction Sticker No.			
Color		Model			
			Applica	nt's Signatu	re over Printed Name
Sticker Number Issued	Date Issued			Valid Until	
OR#	Amount Paid			Date Completed	
Property Management Representative:				Received B	y:
Signature over Printed Name Property Manager			Signature over Printed Name Unit Representative		
APPLICANT'S COPY				Tower Unit No	
Type of Vehicle		Plate No./ Conduction Sticker No.			
Color		Model			