Registration Instructions

Upon purchasing or renting a unit at Parkside, residents (owners and renters) are required to register with the Management Office. To register, residents must submit a resident registration form and a copy of their settlement sheet or lease agreement. After submitting the registration form (below) residents will be issued:

- Parking Permit
- Activity Card
- Mailbox Label
- Resident Handbook
- Laundry Card (one per unit)
- Laundry Room Combination
- Storage Room Key (delivered to unit)

The parking permit and activity card expires every year on September 30. Before that date, a pre-printed registration form will be sent to each unit for residents to review and return for processing.

**Investor Owners:** Investor owners must register with the Management Office after purchasing a unit. To register, the investor owner must submit a copy of their settlement sheet (obtained at settlement) and the owner information sheet (provided in the resale package) to the Management Office.

If you have any questions regarding registration, please call the office.
RESIDENT REGISTRATION

Date: ______________

Please check the appropriate box:   Owner ( )   Renter ( )

I.   Building Address: ___________________________ Unit #: ____________

Unit Phone Number: ___________________________ Is it unlisted? ( ) Yes ( ) No

Is there a Security System for the unit? ( ) Yes ( ) No

II.   Resident Information: (PLEASE PRINT)

Please list the name and year of birth for all residents of the unit. This information will be used to develop demographics of the community for planning play areas and social activities.

*Providing your email address authorizes the Council of Unit Owners of Parkside Condominium to provide notice of relative Association business and to deliver information to you by electronic transmission in accordance with Section 11-139.1 of the Maryland Condominium Act.

<table>
<thead>
<tr>
<th>Occupant Name</th>
<th>Year of Birth</th>
<th>Daytime Phone Number</th>
<th>E-mail Address*</th>
<th>Pool Pass Issued</th>
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Laundry card received: ___________/______________

Resident initials / Office initials

III.   Person to notify in case of personal emergency (optional):

The following will be kept confidential and will be used in case of personal emergency only.

Name: ___________________________ Relationship: __________________

Address: _________________________________________________________

Telephone: Home ( ) ___________________ Work ( ) ___________________
Unit Address: ________________________________

IV. Vehicle Registration (PLEASE PRINT)

Please list all vehicles including automobiles, motorcycles, vans or other vehicles you own, rent or use that may be parked on PARKSIDE CONDOMINIUM property.

Owner/Driver of Vehicle: ___________________________________________

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<tr>
<th>State</th>
<th>License Plate #</th>
<th>Make</th>
<th>Model</th>
<th>Color</th>
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I certify that ( ) I am the owner of record of, or ( ) the owner of record has placed at my exclusive disposal the above described vehicle, which is not a trailer, camper, camp truck, house trailer, boat trailer, boat or the like. I understand that the parking sticker is only valid on the vehicle for which it is issued and only so long as it has not expired or been revoked and that it may be removed from the vehicle at any time if I am no longer entitled to it. I understand that the vehicle may be removed from the location where it is parked to another location on the condominium property at my sole risk and expense if, after notice of the Association’s intention to perform work, its presence impedes the maintenance and repair of the common elements. I further agree that the vehicle may be towed from condominium property at my expense and risk at any time it is parked in violation of Parkside Rules and Regulations.

Resident Signature: ___________________________________________ Date: ___________

Office Use: ___________ Employee Verification: _________ Date: ___________

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Owner/Driver of Vehicle: ___________________________________________

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Resident Signature: ___________________________________________ Date: ___________

Office Use: ___________ Employee Verification: _________ Date: ___________