



Apartment Rentals, LLC

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CHANGE OF VEHICLE INFORMATION

PLEASE PRINT CLEARLY

LOT: _____

NAME: _____

PHONE NO WHERE YOU CAN BE REACHED: _____

LAST 4 DIGITS OF SOCIAL SECURITY NUMBER: _____

"TO PREVENT SOMEONE ELSE FROM CHANGING YOUR INFO."

Type of Change (*check one*)

Temporary Vehicle (from _____ thru _____)

Permanent New Vehicle

OLD VEHICLE: _____

VEHICLE PLATE #: _____ STATE: _____

NEW VEHICLE:

YEAR: _____ MAKE: _____ MODEL: _____

COLOR: _____

VEHICLE PLATE #: _____ STATE: _____

DATE CHANGE BECOMES EFFECTIVE: _____

I agree and understand that I am responsible for informing the Lessor of any vehicle changes *before* parking in the designated lot.

X _____ DATE: _____