

**CROMWELL PARK AT SALEM CONDOMINIUM ASSOCIATION,  
INC.**

3061 Brickhouse Court, Suite 109  
Virginia Beach, VA 23452  
757.333.7675 Fax: 757.333.6872  
Jcopeland@CommunityFirstManagement.com

**PET REGISTRATION FORM**

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Date of Request: \_\_\_\_\_  
Owner(s): \_\_\_\_\_  
Address: \_\_\_\_\_  
Telephone: H-\_\_\_\_\_ C-\_\_\_\_\_ Email-\_\_\_\_\_

**In accordance with the Rules and Regulations of Cromwell Park at Salem Condominium Association, Inc., I/We are requesting approval by the Board of Directors for our one pet. I/We agree, by signing below, to abide by Cromwell Park at Salem Condominium Association Rules and Regulations, including rule number 30 regarding pets.**

Type of Pet (*Check one*): Dog \_\_\_\_\_ Cat \_\_\_\_\_  
Age of Pet: \_\_\_\_\_  
Breed: \_\_\_\_\_  
Gender: \_\_\_\_\_  
Weight: \_\_\_\_\_  
Rabies Vaccination Date: \_\_\_\_\_  
Pet's Name: \_\_\_\_\_

Copy of the City of Virginia Beach registration form (*Required*)

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\_\_\_\_\_  
Signature

\_\_\_\_\_  
Signature

**FOR BOARD USE ONLY**

REVIEWED ON: \_\_\_\_\_

\_\_\_\_ Your request is APPROVED as submitted

\_\_\_\_ Your request is DENIED as submitted

\_\_\_\_ Your request is APPROVED WITH THE FOLOWING CONDITIONS:

