3101 GARAGE

# PARKING LOT

Registration Form

Name of Primary Driver: William J. Bergen

Home Address: 61 Fairfield Road

City, State & Zip code: Havertown, PA 19083-3610



Home Number:610-853-1610



Cell

Number: 610-909-7375

Employer Name: University of Pennsylvania Health Systems (uphs)

Office Phone Number: 215-662-6210

e-mail Address:

William.Bergen@uphs.upenn.edu

Make of Vehicle: Honda Model: CRV



Year of Vehicle: 2011 Color: Sea Foam Green



License Tag #: HVC-3279 State: PA



Alternate Vehicle: Subaru Impreza Model: WRX



Year of Vehicle: 2002 Color: Dark Blue



License Tag #: DXC-2177 State: PA



\*\*\* \*The acceptance of this Registration relieves the issuer or its agent of any responsibility for damages to or loss of vehicle, its contents or accessories from any cause whatsoever,

DRIVER'S SIGNATURE William J. Bergen DATE 10/02/2017

Unit Number

