

APPLICATION FOR DOCK/SLIP/RIGHT $\underline{HOLDING}$ TRANSFER

Please print the whole application and send to Tami Waller at the ALA office. Phone: (909) 337-2595, ext. 101; Email: twaller@ala-ca.org; Fax: (909) 337-6371

DATE:		
DOCK/SLIP/RIGHT INFORMATION:		
Dock/Slip/Right #:		
Name(s):		
Mailing Address:		
	House APN#	<u>-0000</u>
Email:		
Contact Phone #:	Cell Phone #:	
(\$1,000) for transferring this Slip Right property in Arrowhead Woods.		ualified real
<u>A total itemized listing of fees</u>	will be included with the transfer documents	
Transferor's Signature	Transferor's Signature	
Transferor's Signature	Transferor's Signature	