



Reference No: BatStateU-FO-GSO-08

Effectivity Date: February 9, 2018

Revision No. 00

Title:

VEHICLE REGISTRATION FORM

VEHICLE 1	VEHICLE 2 (Optional)	FOR OFFICE USE ONLY
License Plate # _____	_____	Permit # _____
Prov/State _____	_____	Fee _____
Make & Model _____	_____	Cash Receipt # _____
Year & Color _____	_____	Method of Payment _____

1. Main I Main II Faculty/Employee ID # _____ Student ID # _____
 Faculty/Staff Student Parent Others (Please specify) _____

2. Full Name _____ Current Address _____
City _____ Province _____ Postal _____

3. Telephone: Cell _____ Home _____ Office _____

4. Registered Owner's Name _____
Permanent Address _____ City _____ Province _____

I hereby certify that information provided herein are true and correct to the best of my knowledge and belief and agree to abide by the University's Traffic, Parking and Security Rules and Regulations.

Signature: _____
Applicant

Date: _____

Processed by: _____
Chief Security Officer, SO
Date: _____

Approved by: _____
Director, GSO
Date: _____

BatStateU Security Service Office is committed to protecting the personal information of all members of the Campus community. The information collected on this registration form will be used for the purposes of validating vehicle registration and will be accessible to Security Service Office in the performance of their duties.