

Print Form

OFFICE USE ONLY:

Decal #:

Date Issued:

ID Checked by:

License Plate <u>XXX-1111</u>	State <u>NY</u>	Vehicle Year <u>2013</u>	Vehicle Make <u>Toyota</u>	Vehicle Color <u>Blue</u>	Your Status: <input type="checkbox"/> 01FR <input type="checkbox"/> Faculty <input type="checkbox"/> 02 SO <input type="checkbox"/> Staff <input type="checkbox"/> 03 JR <input type="checkbox"/> M/C <input checked="" type="checkbox"/> 04 SR <input checked="" type="checkbox"/> Commuter <input type="checkbox"/> Resident
Name of Registered Owner <u>John Q. Public</u>				Check One: <input type="checkbox"/> 2DR <input type="checkbox"/> Truck <input checked="" type="checkbox"/> 4DR <input type="checkbox"/> Van <input type="checkbox"/> Subn. (wagon) <input type="checkbox"/> Motorcycle	
Your A# <u>CCAL</u>					

PRINT PERMANENT ADDRESS IN WINDOW BELOW

<u>Public</u>	<u>John</u>	<u>MR</u>
LAST NAME	FIRST	MR
<u>7000 Main Street</u>		
STREET ADDRESS		
<u>Oneonta</u>	<u>NY</u>	<u>13820</u>
CITY	STATE	ZIP

Local/Campus Address:

Local/Campus Phone:

I understand that violation fines will be assessed from Payroll or my records will be held until fines are paid.

I certify that all information is true and accurate to the best of my knowledge.

I agree to display the registration decal only on the vehicle to which it was issued.

I confirm that I am neither a freshman nor sophomore student living on campus, nor registering a vehicle for a freshman or sophomore living on campus, nor another person.

John Q. Public
Applicant's Signature Required