

## **APPLICATION FORM FOR ISSUE OF VEHICLE STICKER**

(For Regular/Contractual Faculty/ Staff only)

1. Name of the Applicant:.....
2. Designation :.....(Empl No).....
3. Department/ Section:.....
4. Address:.....
5. Phone/ Mob No:.....(e-mail).....
6. Driving License No.....(valid upto).....
7. Details of vehicles (**Attach photocopy of RC & DL**) :

S. No.	Vehicle Registration No	Type(2W/4W)	Make /Model	Colour

8. I \_\_\_\_\_ (Name of Applicant) hereby solemnly declare that the information given above is correct to the best of my knowledge & belief. In case of any discrepancy found, suitable disciplinary action may be initiated against me.

Date: \_\_\_\_\_

\_\_\_\_\_  
Signature of the Applicant

9.

<b><u>Applicable for Contractual Employee only</u></b>	
Recommended by the HoD/ Project Head	_____ (Sign with Stamp)

### **For office use only**

Issued Vehicle Sticker No: \_\_\_\_\_

Valid upto: \_\_\_\_\_

Date: \_\_\_\_\_

(Security Officer)