



**TEXAS A&M INTERNATIONAL
UNIVERSITY POLICE DEPARTMENT
PARKING PERMIT INFORMATION**

2010-2011

Name (Last, First,MI)			DOB		TAMIU UIN		
Drivers License		State	Local Address (Street,City,State,Zip)				
Permanent Address (Street,City, State,Zip)							
Home Telephone #:		Business Telephone#:		Cell Phone #:		E – Mail:	
Vehicle Information							
Vehicle #1	License Plate	State	Vehicle	Make	Model	Body	Color
Vehicle #2	License Plate	State	Vehicle	Make	Model	Body	Color
Vehicle #3	License Plate	State	Vehicle	Make	Model	Body	Color
Vehicle #4	License Plate	State	Vehicle	Make	Model	Body	Color
I certify that the above information is correct and I agree to keep it updated and pay all valid penalties. I agree to comply with State Of Texas statues and TAMIU Parking and Traffic Regulations and consent to methods of enforcement.				(signature)			
				(Date)			
RETURN THIS FORM TO UNIVERSITY POLICE WITHIN TEN DAYS OF PURCHASING PERMIT							
Office Use Only	Type Faculty Staff Students	Permit #	Handicapped	Issued	Expires	Semester	
Valid Year 2010-2011	Fee Collected By	Receipt #	Replaced	Date Entered Ticket tack	Entered By:		