



# TEXAS A&M INTERNATIONAL UNIVERSITY



## POLICE DEPARTMENT

**2009-2010**

### PARKING PERMIT INFORMATION

Name (Last, First, MI)					SSAN/TAMIU UIN		
DL#	State	Local Address (Street, City, State, Zip)					
Permanent Address (Street, City, State, Zip)							
Home Telephone #:	Business Telephone#:	Cell Telephone#:	E Mail:				
<b>Vehicle Information</b>							
<b>Vehicle #1</b>	License Plate	State	Vehicle Year	Make	Model	Body	Color
<b>Vehicle #2</b>	License Plate	State	Vehicle Year	Make	Model	Body	Color
<b>Vehicle #3</b>	License Plate	State	Vehicle Year	Make	Model	Body	Color
<b>Vehicle #4</b>	License Plate	State	Vehicle Year	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 statutes and TAMIU Parking and Traffic Regulations and consent to methods of enforcement.				(Signature)			
				(Date)			
<b>RETURN THIS FORM TO UNIVERSITY POLICE WITHIN TEN DAYS OF PURCHASING PERMIT</b>							
Office Use Only	Type Faculty    Staff Student	Permit #	Handicapped	Issued	Expires	Semester	
Valid Year 2009-2010	Fee Collected By	Receipt #	Replaced	Date Entered TicketTrak		Entered By	