

# LOUISIANA TECH UNIVERSITY VEHICLE REGISTRATION INFORMATION

**Directions:**

1. Print Form
2. Fill out **ALL** information with one character per box
3. Bring to Traffic Office with documents

You **MUST** provide:

1. Valid driver's license
2. Valid vehicle registration
3. Tech ID

Tech ID Number <input style="width: 100%; height: 20px;" type="text"/>	Social Security Number <input style="width: 100%; height: 20px;" type="text"/>	Driver's License Number <input style="width: 100%; height: 20px;" type="text"/>	State <input style="width: 100%; height: 20px;" type="text"/>
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Last Name <input style="width: 100%; height: 20px;" type="text"/>	First Name <input style="width: 100%; height: 20px;" type="text"/>	MI <input style="width: 100%; height: 20px;" type="text"/>
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Permanent Home Address (NOT DORM)

City <input style="width: 100%; height: 20px;" type="text"/>	State <input style="width: 100%; height: 20px;" type="text"/>	Zip Code <input style="width: 100%; height: 20px;" type="text"/>
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Home (Area Code) Phone Number <input style="width: 100%; height: 20px;" type="text"/>	Cell (Area Code) Phone Number <input style="width: 100%; height: 20px;" type="text"/>
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Vehicle License Number <input style="width: 100%; height: 20px;" type="text"/>	State <input style="width: 100%; height: 20px;" type="text"/>	Check if Standard <input style="width: 100%; height: 20px;" type="text"/>	Special Plate Type <input style="width: 100%; height: 20px;" type="text"/>
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Vehicle Make <input style="width: 100%; height: 20px;" type="text"/>	Model <input style="width: 100%; height: 20px;" type="text"/>	2D <input style="width: 100%; height: 20px;" type="text"/>	4D <input style="width: 100%; height: 20px;" type="text"/>	PU <input style="width: 100%; height: 20px;" type="text"/>	VN <input style="width: 100%; height: 20px;" type="text"/>
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VIN (Vehicle Identification Number) <input style="width: 100%; height: 20px;" type="text"/>	Year <input style="width: 100%; height: 20px;" type="text"/>	Color <input style="width: 100%; height: 20px;" type="text"/>
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Registered Owner of Vehicle		
Last Name <input style="width: 100%; height: 20px;" type="text"/>	First Name <input style="width: 100%; height: 20px;" type="text"/>	MI <input style="width: 100%; height: 20px;" type="text"/>

I certify that the information above is true and correct and that I am purchasing this parking permit for my own personal use; it is not to be given, traded, sold or used by any other person. I agree to abide by the Louisiana Tech University Traffic Regulations that I received upon purchasing my permit.

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

Permit Number: \_\_\_\_\_ Permit Type: \_\_\_\_\_ Zone: \_\_\_\_\_

Expiration Date: \_\_\_\_\_ Amount Paid: \_\_\_\_\_ Entered By: \_\_\_\_\_