

Decal # \_\_\_\_\_

# Tennessee Temple University

Department of Security  
Vehicle Registration Form

Name: \_\_\_\_\_  
(Print) Last First MI

ID #: \_\_\_\_\_

**(On Campus Students/Staff/Faculty)**

Dorm Room: \_\_\_\_\_

Phone Ext.: \_\_\_\_\_

Owner Of Vehicle: \_\_\_\_\_

**(Off Campus Student/Staff/Faculty)**

Local Address: \_\_\_\_\_  
\_\_\_\_\_

Contact Phone # \_\_\_\_\_

**All** (Check all that apply)

Student     I **will not** have a car on campus    (Circle one) SP/Fall Year: 20\_\_\_\_\_

Staff     I **will** have a car on campus    (Staff/Faculty) Dept: \_\_\_\_\_

Faculty

### Vehicle Information

Make: \_\_\_\_\_

Model: \_\_\_\_\_

Year: \_\_\_\_\_

Color: \_\_\_\_\_

Tag Number: \_\_\_\_\_

State: \_\_\_\_\_

Insurance Co: \_\_\_\_\_

Policy Number: \_\_\_\_\_

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

I understand that if there are any changes in my plans to operate a vehicle or with the vehicle that I have registered, I will register the change with Campus Security within 48 hours.

\_\_\_\_\_  
**Signature**

\_\_\_\_\_  
**Date**