

APPLICATION FORM FOR CAR STICKERS

*Please affix
your passport
Photograph*

IMPORTANT INFORMATION

This Form, when duly completed, must be submitted to the Head of Unit, Transport Office, Works & Services Dept. LASU, Ojo, with two (2) copies of the vehicle documents (sighting of the original copy is essential). The Form must be endorsed by the Head of Dept./Head of Unit/Dean of the Applicant.

A. PERSONAL DATA OF APPLICANT

1. Name (Surname first)
2. Sex Blood Group (If known)
3. Residential Address
4. Faculty
5. Department
6. Unit
7. Staff Personnel Number (Please attach a photocopy of your ID Card)
.....
8. Category of staff (Academic or Non-Academic)
9. Student Matriculation Number (Please attach a photocopy of your ID Card)
.....
10. Faculty Dept. Level
11. Name and Address of vehicle owner of different from A1 & A3 above
.....
12. Your relationship with the owner of the Vehicle

B. VEHICLE DATA

1. Vehicle Type Model
2. Vehicle Colour Vehicle License No.
3. Insurance Policy No. Insurance Type
4. Vehicle Chassis No. Engine No.

C. Declaration

I,..... hereby
declare that information provided is correct to the best of my knowledge.

Applicant Signature Date:

D. Attestation

Name of Head of Dept./Head of Unit/Dean

Signature:..... Date:

E. FOR OFFICIAL USE ONLY

1. Name of Checking Officer:

2. Remark of the Checking Officer: (Recommended or Not
Recommended)

3. Signature of the Checking Officer:

4. Date: