

APPLICATION FORM FOR CAR STICKERS



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)
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- 8. Category of staff (Academic or Non-Academic)
- 9. Student Matriculation Number (Please attach a photocopy of your ID Card)
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- 10. Faculty Dept. Level
- 11. Name and Address of vehicle owner of different from A1 & A3 above
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- 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: