

**Lock Haven University Vehicle Registration**  
**Resident Students must have 30 credit hours earned**

**Official Use Only**  
Issued by \_\_\_\_\_ Date \_\_\_\_\_  
Permit# \_\_\_\_\_

Please print legibly and fill out all information

**Last Name** \_\_\_\_\_ **First Name** \_\_\_\_\_

**Driver #** \_\_\_\_\_ **State** \_\_\_\_\_ **Expiration Date:** \_\_\_\_\_

**Student ID#** \_\_\_\_\_ **E-Mail Address** \_\_\_\_\_

**Permanent Address:** \_\_\_\_\_ **Permanent Phone#** \_\_\_\_\_

**Campus Address:** \_\_\_\_\_ **Campus Phone#** \_\_\_\_\_

**Vehicle Year:** \_\_\_\_\_ **Make:** \_\_\_\_\_ **Body Style:** 2door - 4door – SUV – Truck – Van- N/A  
(Circle One) \_\_\_\_\_

**Color/s:** \_\_\_\_\_ **Plate#** \_\_\_\_\_ **State** \_\_\_\_\_ **Exp. Date:** \_\_\_\_\_

**Owner/s:** \_\_\_\_\_ **Address:** \_\_\_\_\_

**I agree to abide by the Lock Haven University Parking Rules and Regulations and accept all responsibility for any parking violations that are issued to the above registered vehicle/vehicles and further agree to satisfy all payment of fines of said violations.**

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

(Rev. 7/09)