Parking & Transportation Vehicle Registration Card Decal Number E or S The street Address		Eastern Kentucky University				For Parking Office Use Only			
Name Street Address Campus Address & Department Campus Phone Home Phone Social Security # or EKU ID # Please list all vehicles that will/may be parked on campus (maximum of four) Vear Make Model Color License Plate # State County Date:		Parking &	Transporta	tion		Assigned			
Street Address Campus Phone Home Phone Social Security # or EKU ID # Please list all vehicles that will/may be parked on campus (maximum of four) Vear Make Model Color License Plate # State County Date:		Vehicle Registration Card				Decal Nu	mber	E or S	
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	Zear	Make	Model	Color	Licens	e Plate#	State	County	
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