

# Employee Vehicle Registration Form

"Please print or type"

All employees must complete sections I & II

I. NAME: \_\_\_\_\_  
(Last) (First) (Middle)  
Address: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_  
Home Phone: \_\_\_\_\_ SSN: \_\_\_\_\_ DOB: \_\_\_\_\_  
DL#: \_\_\_\_\_ State of Issue: \_\_\_\_\_  
Liability Insurance (Circle One): Yes No  
Policy #: \_\_\_\_\_

II. Division (Circle One): Seattle American Lake  
Work Telephone #: \_\_\_\_\_ Extension: \_\_\_\_\_  
Service Line: \_\_\_\_\_

III. All employees who will be parking on station at either division must complete section III. Please list only the vehicles that you will be using to park on station.

## VEHICLE #1:

License Plate #: \_\_\_\_\_  
State of Issue: \_\_\_\_\_  
Car Manufacturer: \_\_\_\_\_  
Model: \_\_\_\_\_ Body Style: \_\_\_\_\_  
Year: \_\_\_\_\_ Color: \_\_\_\_\_  
Decal # \_\_\_\_\_ Date: \_\_\_\_\_

## Vehicle #2:

License Plate #: \_\_\_\_\_  
State of Issue: \_\_\_\_\_  
Car Manufacturer: \_\_\_\_\_  
Model: \_\_\_\_\_ Body Style: \_\_\_\_\_  
Year: \_\_\_\_\_ Color: \_\_\_\_\_  
Decal # \_\_\_\_\_ Date: \_\_\_\_\_

## VEHICLE #3:

License Plate #: \_\_\_\_\_  
State of Issue: \_\_\_\_\_  
Car Manufacturer: \_\_\_\_\_  
Model: \_\_\_\_\_ Body Style: \_\_\_\_\_  
Year: \_\_\_\_\_ Color: \_\_\_\_\_  
Decal # \_\_\_\_\_ Date: \_\_\_\_\_

## Vehicle #4:

License Plate #: \_\_\_\_\_  
State of Issue: \_\_\_\_\_  
Car Manufacturer: \_\_\_\_\_  
Model: \_\_\_\_\_ Body Style: \_\_\_\_\_  
Year: \_\_\_\_\_ Color: \_\_\_\_\_  
Decal # \_\_\_\_\_ Date: \_\_\_\_\_

Official inputting data: \_\_\_\_\_

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