

**APPLICATION FOR REGISTRATION OF VEHICLE
SOUTH EASTERN UNIVERSITY OF SRI LANKA**

FILL IN DUPLICATE

The following information are required to register the vehicle due to the prevailing security situation in the country.

Caution:

The University will not take any responsibility with regard to the safety of the vehicle during the hours you park the vehicle inside the University premises

01. PERSONAL INFORMATION

- I) Full Name :
- II) Name with initials :
- III) NIC No. :
- IV) Employee's Service No :
- V) Designation :
- VI) Nature of Appointment:
(Permanent/Temporary / Casual)
- VII) Official Address :
(Faculty / Department / Division / Unit)
- VIII) Private Address :
- IX) Phone Nos. :

02. VEHICLE INFORMATION

- I) Name of the Owner of the Vehicle :
(Please attach the copy of the vehicle registration book)
- II) Vehicle registration number (as per the registration) :
- III) Type of vehicle (eg. car, van, bus, motor cycle, etc.) :
- IV) Make (eg. Toyota, Nissan, etc.) :
- V) Model (eg. Sunny N16 , Corolla 141 etc.) :
- VI) Year of manufacture :
- VII) Year of registration in Sri Lanka :
- VIII) Engine capacity :
- IX) Engine number :
- X) Chasse number :

- XI) Color of the vehicle :
- XII) Whether it is fully insured :
- XIII) Name of the insurer :
- (Please attach copy of the certificate of insurance)

I certify that the above information given by me is correct and true.

..... Date

(Signature of Employee)

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RECOMMENDATION OF HEAD OF THE DEPARTMENT

Recommended / Not Recommended.

..... Date

(Dean/Head of Department)

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FOR OFFICIAL USE

Chief Security Officer

Pease take necessary action to allow the vehicle (No.....) of
 Prof/Dr/Rev/Mr/Ms..... within the university premises

..... Date

Deputy Registrar

General Administration