

SECURITY OFFICE DECAL REQUEST RECEIPT RESERVED

AUTHORIZED USE ONLY

DECAL NO. _____

NAME _____

COLLEGE ID _____

I HAVE READ THE MOTOR VEHICLE RULES AND REGULATIONS FOR PALM BEACH STATE COLLEGE AND AGREE TO ABIDE BY THEM. I UNDERSTAND THAT FAILING TO ABIDE BY THE RULES AND REGULATIONS MAY RESULT IN CITATIONS AND OTHER PENALTIES.

VEHICLE DESCRIPTION

MAKE: _____

MODEL: _____

COLOR: _____ YEAR: _____

STATE _____ PLATE # _____

SIGNATURE OF FACULTY/STAFF

DATE

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