



OFFICE OF THE CHIEF PROCTOR UNIVERSITY OF KASHMIR SRINAGAR

Format for Vehicle Pass

Emp. Code:- _____

1. Name:- _____
2. Parentage: _____
3. Designation: _____
4. Department: _____
5. Permanent Address: _____
6. Mobile. No. Mandatory:- _____ Email _____
7. Vehicle Reg. No. (Four Wheeler):- _____ Make _____
8. Vehicle Reg. No. (Two Wheeler):- _____ Make _____
9. Driving License No:- _____

Signature of the Employee

UNDERTAKING

-) I declare that the above information is true and correct to the best of my knowledge;
-) The vehicle pass issued will be exclusively used by me and for my own vehicle;
-) In case of change of vehicle, I shall inform the Chief Proctor's Office well in time;
-) I shall park my vehicle only in the designated parking slot near my Department/Centre/Office/Section.

Signature of the Employee

For Office Use Only

Approved: Pass No: _____ Validity: _____	Not Approved: Remarks: _____ _____
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Checked By: _____

Note:

-) Misuse of vehicle pass warrants strict action under rules;
-) Hard copy of the application form along with Xerox copies of Official Identity Card, DL and RC to be submitted in the office of the Chief Proctor.