

Permit Number

SUNY POTSDAM VEHICLE REGISTRATION
Faculty/Staff Registration

NAME: _____ / _____ College ID # _____
Last First Begins with "P" or "@"

Vehicle Information: Plate # _____ State/Province _____

Vehicle Make _____ Model _____ Vehicle Color _____

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- | | | | |
|---|-------------------------------------|---------------------------------------|--|
| <input type="checkbox"/> Faculty/Staff | <input type="checkbox"/> PACES | <input type="checkbox"/> Emeritus | <input type="checkbox"/> College Council |
| <input type="checkbox"/> College Foundation | <input type="checkbox"/> Maxcy Club | <input type="checkbox"/> Alumni Board | <input type="checkbox"/> Host Teacher |
| <input type="checkbox"/> Temporary | <input type="checkbox"/> Vendor | <input type="checkbox"/> Other _____ | |

Campus Address _____

Campus Telephone _____

***Students employed by the college must register as students NOT staff.**

For Office Use Only:

Method of Payment: Cash Check/M.O. Visa/Mastercard Deferred/Bill to _____
Amount Paid _____ Date _____ Receipt Number _____

****You may use this form to register your vehicle for campus. Payment must be made separately to University Police. We accept cash, check (made payable to SUNY Potsdam) and Visa/MasterCard.****