

Application for Registration – E-Tag Based Vehicle Access Management System
Khwaja Fareed University of Engineering & Information Technology (KFUEIT), Rahim Yar Khan

For KFUEIT Faculty and Staff

A. Personal Information

Full Name		CNIC	
Driver License No.		Gender	<input type="checkbox"/> Male <input type="checkbox"/> Female
Email		Mobile No.	
Residential Address			
Department		Designation	
Job Type	<input type="checkbox"/> Regular <input type="checkbox"/> Contract <input type="checkbox"/> Adhoc/other	Employee No	

B. Vehicle Information

Tag Type	<input type="checkbox"/> E-Tag <input type="checkbox"/> M-Tag		
Vehicle Type	<input type="checkbox"/> Car <input type="checkbox"/> Bike <input type="checkbox"/> Other _____	Registration No.	
Chassis No.		Engine No.	
Model Type		Model Year	
Color		No. of Previously Enrolled Vehicles	

C. Requested E-Tag Subscription Plan

Sr. No	Plan	Charges (Rs.)	Select
1	1 Month	120	<input type="checkbox"/>

D. Terms & Conditions

By signing this form, I hereby agree to

1. Abide by all general traffic rules and KFUEIT policies/SOPs regarding vehicular access and parking.
2. Park my vehicle only in parking areas designated for KFUEIT Employees.
3. Not carry unauthorized persons in my vehicle while entering or exiting the University premises without following the prescribed visitor entry process.
4. Follow any other generic instructions issued by the University from time to time.

Applicant's Signature _____ **Date** ____/____/____

E. Head of Department

Head of Department Name		Signature		Date	
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F. Security Department

Permitted Access Points (Entry/Exit Gates)					
Permitted Parking Areas					
Remarks if any					
Chief Security Officer	Name		Signature		Date