



LAMAR STATE COLLEGE ★ PORT ARTHUR

## Vendor Parking Application

Decal #: \_\_\_\_\_  
(FOR OFFICE USE ONLY)

Vendor: \_\_\_\_\_ Cell phone# \_\_\_\_\_  
(PLEASE PRINT)

Vendor Approval Dates #: \_\_\_\_\_ Vehicle Operator: \_\_\_\_\_

Vehicle 1 License Plate #: \_\_\_\_\_ Color: \_\_\_\_\_

Year: \_\_\_\_\_ Make: \_\_\_\_\_ Model: \_\_\_\_\_

Vehicle 2 License Plate #: \_\_\_\_\_ Color: \_\_\_\_\_

Year: \_\_\_\_\_ Make: \_\_\_\_\_ Model: \_\_\_\_\_

If more than 2 vehicles – send this form with further data attached to an email to [ParkingandID@lamarpa.edu](mailto:ParkingandID@lamarpa.edu)

Permanent Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

*I understand that any false statement on this application will make me subject to penalty fee and/or disciplinary action. I acknowledge I have received a copy of the Lamar State College-Port Arthur Parking Regulations Pamphlet.*

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

For any questions contact Parking and ID Department @ [ParkingandID@Lamarpa.edu](mailto:ParkingandID@Lamarpa.edu) (409) 984-6161

All Vendor Parking Placards MUST be returned no later than the last day of the approval dates listed.