GOVT.OF NCT OF DELHI
MAULANA AZAD MEDICAL COLLEGE: NEW DELHI-110002

SECURITY CELL

PERFORMA FOR ISSUANCE OF PARKING LABEL FOR MAMC CAMPUS

1. Name of Student & Roll Number ……
2. MBBS Batch- ……
3. Hostel Room Number & Contact No. ……
4. Parking label required for Motor Car/Motor cycle/Scooter …… ……
5. Vehicle No. & Make ……
6. Name of the owner (With relationship) ……
7. Enclose copy of registration Certificate of vehicle and copy of ID Card. Also mention Previous label No. if renewal case……

Signature of the applicant

Name, Signature & Designation Of
The recommending Registrar with…… (Stamp)

Name of the Warden ……
Signature of the Warden …… (Stamp)

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OFFICE USE:-

Issuance of Vehicles parking label No ……Dated……

Security In charge
MAMC

Signature of Receiving Vehicles Label