



VIRGINIA STATE UNIVERSITY

**Sold/Destroyed/Replaced Vehicle or Change of Registration
Form**

Academic Year 2022-2023

Date: ____/____/____

Name: _____

Social Security Number (last four): _____

Decal Number: _____

License Plate Number: _____

Choose one:

Vehicle Sold

Vehicle Replaced

Vehicle Destroyed

**Registration of Vehicle
Changed**

I, _____, verify that I am submitting a partial 2022-2023 decal to the Cashier's Office due to the indicated reason above. I accept liability and the terms of Section VI, Paragraph III of the *VSU Parking Rules and Regulations Manual* in order to obtain a replacement decal.

CASHIER'S OFFICE USE ONLY

New Decal #	Price	Cashier	Date
_____	_____	_____	_____

Issuing Parking Officer

Date

Parking Services Specialist

Date