

Department of Security – L200A 848 Adams Street Memphis, TN 38103 FAX# 287-5930

Dear Sir or Madam:

Please place the decal when received on the outside of your vehicle's rear window, driver's side, at the bottom. If your vehicle has a vinyl window, as many convertibles do, you may place your decal at the top of the passenger side of the front windshield. Please affix the decal as soon as possible after receiving it.

If you have questions, please call Le Bonheur Security Administration at 287-4456 Monday - Friday.

Thanks for your cooperation.

## PLEASE PRINT AND FILL OUT ALL AREAS BELOW (Incomplete forms cannot be processed)

## ALL AREAS MARKED WITH AN ASTERISK MUST BE FILLED IN

| Please check one                                  | Fellow   | _Resident Physician     |  |
|---|--|-------------------------|--|
| *Name:  |  | Dept. or<br>Group Name: |  |
| *Home Address:                                    |  |                         |  |
| *   |  |                         |  |
| City  | ;  | State                   | Zip Code   |
| * Dept./Office Phone # or                         | r Pager #  |                         |  |
|   | Vehicle One  | Vehicle Two             | Vehicle Three  |
| License Plate Number _                            |  | <del></del>             |  |
| State _   |  |                         |  |
| Make _  |  |                         |  |
| Model _   |  |                         |  |
| Color _   |  | <del></del>             |  |
|   |  | Agreement to Comply     |  |
| Associate Handbook an<br>federal regulations that | d/or Medical Center Pare applicable to LBC ed parking lots. I also |                         | olicies as delineated in the and with any city, state, or olderstand that I am granted free of the parking policy may resu |
| in the issuing of a citation                      | on.  |                         |  |

Decal # 1 Decal # 2 Decal # 3



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