



# Stony Brook University

## Fleet Information Change Form

### Mobility and Parking Operations

**Instructions:** Please fax to Mobility and Parking Services at (631)632-4615.

For questions, please call (631) 632-6422

#### Application Information

Name: \_\_\_\_\_ Date: \_\_\_\_\_

Department: \_\_\_\_\_

#### Vehicle Information

License Plate: \_\_\_\_\_ State: \_\_\_\_\_ Year: \_\_\_\_\_

Make: \_\_\_\_\_ Model: \_\_\_\_\_ Color: \_\_\_\_\_

#### Department Changes

- **Account Number to be charges for repairs & gas**

From: \_\_\_\_\_ (Old Account)

To: \_\_\_\_\_ (New Account)

- **Fleet contact person and telephone number**

Contact Name: \_\_\_\_\_

Telephone: \_\_\_\_\_