

APPLICATION FOR CYCLE TOKEN**ONLY CARD PAYMENT DEBIT/CREDIT**

01. Name in Block letters: Ph:

02. Designation & Dept. /Course & Branch.....
(Course & Branch for Students only)

03. ID/Roll No.....Semester (Only for students).....

04. Address:

(i) Office/Hostel Room no:

(ii) Residence

05. Cycle Particulars

(i) Brand name (ii) **Frame No**..... (iii) Color.....

SIGNATURE OF APPLICANT

Recommending Authority
(HOD/Warden with Office Seal)

CSO

(For office use only)

Token no.....Colour..... Date.....Issued by.....

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