

**GALVESTON BAY REFINERY SECURITY  
PARKING PERMIT APPLICATION**  
PLEASE PRINT

**Applicant Name:** \_\_\_\_\_

**Company Name:** \_\_\_\_\_

**Building/Unit:** \_\_\_\_\_ **Division:** \_\_\_\_\_

**Applicant Phone:** \_\_\_\_\_ **Email:** \_\_\_\_\_

**Applicant Supervisor:** \_\_\_\_\_ **Shift:** Days A B C D U

**Justification for Permit:**       New Permit                       Renew Permit  
     Lost/Stolen Permit               Change Location

**TAR Pass – working at GBR for TAR only:** (Circle One) YES or NO

**Vehicle Insured:** (Circle One) YES or NO      *Note: Be prepared to show proof of insurance*

**Primary Vehicle:**

Make	Model	Year	License Plate #	State	Decal Pass # Completed by Security

**Secondary Vehicle(s):**

Make	Model	Year	License Plate #	State	Decal Pass # Completed by Security

**Applicant's Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Applicant's Printed Name:** \_\_\_\_\_

**RETURN THIS COMPLETED FORM TO SECURITY**

*To be completed by Security*

**Security officer initial:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Valid Parking Lots:** \_\_\_\_\_ **Valid DL** \_\_\_ **Valid Insurance** \_\_\_ **Valid Insurance** \_\_\_\_\_