

**Trip Pass Application
for Electronic Toll**

Questions on how to complete this form?

Please call us on
+91-44-24967766
(10AM to 5PM)

Send completed form to:

ITEL Toll Plaza,
Seevaram (near Perungudi),
Chennai – 600096
Fax:
+91-44-24967755
Email:
ceo@tnrdc.com
pnkannan@tnrdc.com

Personal Information

NAME			
DATE OF BIRTH (dd/mm/yy)			
ADDRESS			
PHONE (RES/OFF)		PHONE (MOBILE)	
EMAIL			

Vehicle Information

VEHICLE MODEL			
REGISTRATION NO		*Copy of vehicle registration Form must be provided for each vehicle	
VEHICLE CLASS	<input type="checkbox"/> Auto <input type="checkbox"/> Car <input type="checkbox"/> LCV <input type="checkbox"/> Bus <input type="checkbox"/> Truck		
NO OF TRIPS	<input type="checkbox"/> 50 <input type="checkbox"/> 100 <input type="checkbox"/> Other (Multiples of 50/100):		
TRANSACTION TYPE	<input type="checkbox"/> On Board Unit <input type="checkbox"/> Smart Card		

Declaration

I hereby certify that all the information provided is true and correct and have provided all necessary supporting documentation along with the application form .I agree to the general Terms and Conditions of use and understand that Abuse of the discount policy as Applicable form time to will result in loss of the discount .The rules of the discount policy may vary from time to time.

DATE		SIGNATURE	
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For Office Use Only

RECEIVED BY		CHECKED (YES/NO)	
DEPARTMENT		DATE	
OBU NUMBER		NO OF TRIPS	
SMART CARD NUMBER		NO OF TRIPS	
TOTAL PAID		RECEIPT NO	