

Port of Port Arthur
PERSONALLY OWNED VEHICLE (POV) FORM

A valid POPA Port Identification Card must be presented with this application. All requested information must be clearly printed in ink.

Name: _____

Street Address: _____

City: _____ **State:** _____ **Zip Code:** _____

Employer: _____

Home Phone No: _____ **Work Phone No:** _____
(include Area Code) (include Area Code)

State the reason why you should be allowed to use your POV on POPA terminal property in the performance of your work duties:

Vehicle Information:

Make **Model** **Color** **Year**

Plate Number **State** **Expiration Date**

I hereby apply for the permission to use my personally owned vehicle (POV) in the performance of my work duties and responsibilities on POPA terminal property.

Requesting Person Signature

Date

FSO Signature If Approved

Date

Any questions concerning the use of and how to complete this form, please contact the POPA FSO at (409) 983-2029