

※Do not fill-in

※車両入構登録証番号	
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車両等入構許可証交付申請書

Application for vehicle permit

Date(MM/DD/YY): _____

To Director General

High Energy Accelerator Research Organization

Applicant's name _____

Address _____

Telephone _____

Request for issuance of the KEK vehicle permit for the following.

1. Type (Please choose type of your vehicle and describe its detail)

- ☐ Car _____ ex. TOYOTA PRIUS
- ☐ Motorcycle _____ ex. KAWASAKI Ninja400
- ☐ Bicycle _____ ←Leave blank if unsure.

2. Color _____

3. License/Registration plate number _____
(Only car and motorcycle)

4. Stay of on-site From (MM/DD/YY) / / to (MM/DD/YY) / /

※Visiting number of times /week or month _____

※(If you have one)

Vehicle permit (green color: until March 31, 2026) No. _____

Gate card number No. _____

* New vehicle permit (yellow color: until March 31, 2027) will be issued in
exchange for old permit (green color: until March 31, 2026) .

5. Purpose for entering KEK _____

ex. BELLE II exp. / PF exp.

※Contact person (Please get a signature from KEK staff.)

機構の主な対応職員

Division name (所属) : _____ Signature (氏名) : _____