



**DEPARTMENT OF SAFETY & SECURITY
PARKING PERMIT APPLICATION FORM**

"Protecting the Leaders of Tomorrow"

OFFICE USE ONLY (APPLICANT DO NOT WRITE)

PERMIT NUMBER: _____ COMMUTER STUDENT
INS. / REGISTRATION : YES NO HOUSING STUDENT: _____
(HALL NAME & ROOM#)
 STAFF / FACULTY
CS&S STAFF: _____ Temp/Guest - **Lot Assigned:** _____

GENERAL INFORMATION

STUDENT/STAFF ID #: _____ **DEPARTMENT** (*Staff only*): _____
FIRST NAME: _____ **MIDDLE INITIAL:** ___ **LAST NAME:** _____
PERMANENT ADDRESS: _____
CITY: _____ **STATE:** _____ **ZIP CODE:** _____
HOME/OFFICE PHONE #: _____ **CELL PHONE #:** _____
DL#: _____ **STATE:** _____

VEHICLE INFORMATION

VEHICLE MAKE: _____ **VEHICLE MODEL:** _____
VEHICLE STLYE: _____ **VEHICLE YEAR:** _____ **VEHICLE COLOR:** _____
LICENSE PLATE/ TAG NUMBER: _____ **STATE:** _____
TEMP TAG (*Temporary Dealer Tag Only*): _____ **STATE:** _____ **EXP DATE:** _____

DISCLAIMER / READ AND SIGN

As a permit holder I understand that I may park the above registered car/vehicle in the designated location. I further understand that parking privileges may be revoked for any violations of the rules and regulations, that the University reserves the right to have any vehicle towed from its property at the owner's risk and/or searched upon request and that the University is not responsible for any vehicle or its contents while it is parked on University property.

I have read and agree to comply with all the rules, regulation, and policies regarding university traffic/parking enforcement, I also understand failure to comply will result in fines and fees.

APPLICANT NAME (Print): _____

APPLICANT SIGNATURE: _____ **DATE:** _____

I have received a copy of the university parking rules and regulations booklet. Initials: _____