



## PARKING PERMIT REGISTRATION

Please print clearly, any registration form not legible will be returned.

Name: \_\_\_\_\_

FIRST

M/I

LAST

DRIVERS LICENSE NUMBER: \_\_\_\_\_ CLASS: \_\_\_\_\_ STATE: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

STREET ADDRESS, NO P.O. BOX NUMBERS

CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP CODE: \_\_\_\_\_

PHONE: \_\_\_\_\_ ALT. PHONE: \_\_\_\_\_

PERMIT TYPE:    STUDENT [  ]    FACULTY/STAFF [  ]

STUDENT I.D. NUMBER: \_\_\_\_\_

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This permit is being issued to the individual listed above and may be transferred to any vehicle driven by this person. Permit shall not be used by, or transferred to any other person. It may be used only by the person to whom it has been registered to.

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My signature certifies I understand the above.

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**\*\*PLEASE DO NOT WRITE BELOW THIS LINE. OFFICAL USE ONLY.\*\***

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PURCHASE DATE: \_\_\_\_\_

EXPIRATION DATE: \_\_\_\_\_

FEE: \$ \_\_\_\_\_ (No fee unless original is being replaced due to loss.)

PERMIT NUMBER: \_\_\_\_\_

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