

## Syracuse University 2017-2018 EMPLOYEE Parking Application

A valid Syracuse University I.D. or official University document containing your I.D. number is required to obtain a parking permit.

Print **all** information clearly and include your signature. **Incomplete forms will not be processed!**

If you have an outstanding citation balance, it must be paid before permit will be issued.

### 1. Personal Information

Name (Last, First, Middle):

\_\_\_\_\_

Permanent Address: \_\_\_\_\_

\_\_\_\_\_

Campus Address: \_\_\_\_\_

\_\_\_\_\_

**The following information is required in case there is an emergency where your vehicle is located:**

SUID #: \_\_\_\_\_

Cell Phone #: \_\_\_\_\_

Work Phone #: \_\_\_\_\_

Email Address: \_\_\_\_\_

### 2. Vehicle Information

**Please provide all current vehicle information and copy of registration.**

State	Plate	Make	Model	Style (i.e. 4-door, hatchback, SUV)	Color	Year

### 3. Payment Information - Select one option:

Pre-tax payroll deduction installments.

-Are you paid weekly or semi-monthly?

- Semi-Monthly: 14 installments, first pay period in October through last pay period in April
- Weekly: 30 installments, first Wednesday in October through the last Wednesday in April

- Personal Check (payable to Syracuse University)
- Credit/Debit Card. *\*If choosing the credit card method, you must either call the Parking and Transit Services office at 315.443.4652 or visit the Parking and Transit Services office in person to provide this number. **If your credit card declines, your parking request will not be processed.***

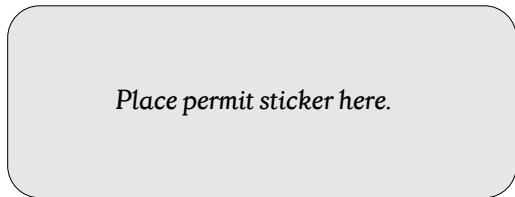
### 4. Certification:

I UNDERSTAND THAT PARKING IS AT MY OWN RISK AND THAT I AM RESPONSIBLE FOR ALL SYRACUSE UNIVERSITY PARKING RULES AND REGULATIONS.    **X** \_\_\_\_\_

Signature

**When complete, you may submit this form by bringing it to our office in person, or mailing it to Parking and Transit Services, 621 Skytop Road Suite 190, Syracuse, NY 13244. You may also fax the form to 315.443.9227 or send via email to parkmail@syr.edu.**

[Office Use Only]



**EMPLOYEE**

Lot: \_\_\_\_\_

Issue Date: \_\_\_\_\_

End Date: \_\_\_\_\_

Subclass: \_\_\_\_\_

Fee: \_\_\_\_\_

Payment Type: \_\_\_\_\_

PD Week: \_\_\_\_\_

Issued By: \_\_\_\_\_

UID#: \_\_\_\_\_