

Syracuse University 2019-2020 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 vehicle registration.

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

3. Payment Information - Note: Payroll Deductions are NOT available for Temporary Employees - payment by Check or Credit Card.

Those eligible for deductions, 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

Upon completion, please bring the form to our office or mail it to us at Parking and Transit Services, 621 Skytop Road Suite 190, Syracuse, NY 13244. You may submit via email at parkmail@syr.edu.

[Office Use Only]

Place permit sticker here.

EMPLOYEE

Lot: _____

Issue Date: _____

End Date: _____

Subclass: _____

Fee: _____

Payment Type: _____

PD Week: _____

Issued By: _____

UID#: _____