

Today's	Date:
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## **Syracuse University Student Parking Application 2024-25**

A current vehicle registration must be shown or copy enclosed when submitting this application. A valid Syracuse University I.D. or official University document containing your I.D. number is required to obtain a parking permit. Type or print all information clearly and include your signature. Incomplete forms will not be processed. All citation balances must be paid before permits will be issued.

Student Information								
□ Park Point □ Campus West								
Last Name:				SUID#:				
First Name: MI:				Cell Phone#:				
Current or Campus Address:				Email Address:				
				Class year:				
Permanent Address:				☐ First-year* ☐ Sophomore				
				☐ Junior ☐ Senior				
Program of Study:				☐ Graduate				
*Resident first-year students must be pre-approved by the director before bringing a car to campus. Review the first-year parking policy on the Parking and Transportation Services website.								
Permit Information: Lot Choice								
First Choice: Second Choice:		TI	Third Choice:					
<b>Permit Duration:</b> □ Expires 12/31 □ Expires 5/15 □ Expires 8/15								
Vehicle Information								
Please provide current ve	hicle informati	on and copy	of vehicle reg	istration.				
State Plate	Make	Model	Style (i.e., SUV, sedan)	Color	Year			
Select Payment Option:								
$\square$ Personal check (to Syracuse University) $\square$ Please bill my Bursar account								
$\hfill\Box$ Credit/debit card (If choosing this option, you must visit the Parking and Transportation Services Office in person to provide this number.)								

Certification			
I understand that parking is at my own risk and that I am responsible for all Syracuse University parking rules and regulations.			
Signature:			
Form Submission			
Upon completing this form, you may either submit via email to <a href="mailto:parkingpermit@syr.edu">parkingpermit@syr.edu</a> , bring the form to the Parking and Transportation Office in person, or mail the form to: Syracuse University Parking and Transportation Services, 621 Skytop Road, Suite 190, Syracuse, NY 13244.			
For Office Use Only:			

Place permit sticker here.

 Student Lot:
 Fee:

Issue Date: \_\_\_\_\_ Payment Type: \_\_\_\_\_

End Date: \_\_\_\_\_\_ Issued by: \_\_\_\_\_

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