



# SYRACUSE UNIVERSITY

## 2007-2008 RESIDENCY STUDENT PARKING APPLICATION

A current Vehicle Registration must be shown or copy enclosed at point of returning application to our office if your vehicle has changed. Please have S.U.I.D card number when applying.

**Incomplete applications will not be processed. Please print all information clearly and include your signature(s). All citation balances must be paid before permits will be issued**

### Personal Information:

<b>NAME:</b> (last, first, middle) _____ _____ <b>Permanent Address:</b> _____ _____ <b>Residency Program:</b> _____	<b>SUID #:</b> _____ <b>Permanent Phone #:</b> _____ <b>Campus Phone #:</b> _____ <b>Cell Phone #:</b> _____ <b>Email Address:</b> _____
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### Permit Information:

**Application for Distance Learning Residency Students ONLY!**

Please check the appropriate box and sign as indicated below

\*\*1 Week equals seven (7) consecutive Days\*\*

NOTE: If dates required for parking run more than 7 days please select a two week and so forth.

Beginning Date of Residency \_\_\_\_\_ End Date of Residency \_\_\_\_\_

\_\_\_ I wish to purchase a permit for South Campus.

1 Wk = \$ 10.50  2 Wks = \$21.00  3 Wks = \$31.50  4 Wks = \$42.00  5 Wks = \$ 52.50

\_\_\_ I wish to purchase a permit for Manley.

1 Wk = \$ 10.50  2 Wks = \$21.00  3 Wks = \$31.50  4 Wks = \$42.00  5 Wks = \$ 52.50

\_\_\_ I wish to purchase a permit for West Campus .

1 Wk = \$ 29.00  2 Wks = \$58.00  3 Wks = \$87.00  4 Wks = \$116.00  5 Wks = \$ 145.00

### Vehicle Information:

**Please send a copy of vehicle registration along with this form.**

STATE	PLATE	YEAR	MAKE	MODEL	COLOR

### Payment Information:

Select one of the payment methods listed below:

\_\_\_ Check (made payable to Syracuse University)

\_\_\_ Credit Card # (MasterCard or Visa) \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ Card expires on: \_\_\_\_/\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

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

X SIGNATURE \_\_\_\_\_

### FOR OFFICE USE ONLY:

PERMIT TYPE	PERMIT NUMBER	HOME LOT	ISSUE DATE	END DATE	FEE	PAYMENT TYPE
<b>COMMENTS:</b>			<b>AUTHORIZED BY:</b>		<b>ISSUED BY:</b>	
<b>COMMENTS:</b>			<b>AUTHORIZED BY:</b>		<b>ISSUED BY:</b>	