

EMPLOYEEParking Permit Registration

Please complete and return this form to Emory's Parking Office on Clairmont Campus: **1945 Starvine Way, Suite 400B** Take the C, E, or Loop shuttle from main campus or park in Starvine Visitor Deck, the first 30-minutes are free. Office hours are Monday-Friday; 7:30am - 4:30pm. For questions related to parking, email parking@emory.edu.

I. APPLICA	NT INFORMATION				
Full Name:	ot .	First		Middle	
Home Address: Street Address			20. (2.		
	Street Address Work lo		City / State Cell phor	Zip	
II. VEHICLE INFORMATION Dept. Use ONLY					
				Dept. Ose ONL I	
	acturer)	- 11			
Model License Plate #					
State of Registration		I PKG. COU	Pkg. Code:		
	r	I Initials:		Date://	
III. PERMIT OPTION REQUESTED					
Annual permit Provides unlimited access to assigned parking area					
Occasional permit (Eagle Pass) Provides one access to assigned parking area per use. \$5/swipe, purchase in increments of 5.					
Temporary permit Provides unlimited access to assigned parking area during the time period purchased, up to six months.					
Start da	ite: En	d date:			
Provides	Evening permit Provides unlimited access to assigned parking area after 2:00PM, Monday-Friday. Permit is not valid for use in permit areas between 6:00AM and 2:00PM, Monday-Friday.				
IV. COMMU	ΓΕ ALTERNATIVES - Cu	stom Commute Pla	nning		
I'm interested in finding a commute alternative (transit, carpool, vanpool, walk, bike). Please contact me with more information.					
V. AGREEM	ENT/SIGNATURE				
Rules & Regu am responsib attached, and	that I am responsible for a ulations, and by my signa le for any fines or fees as I that non-payment of a v vehicle and/or deactive	ture below agree to a ssociated with this pe ny fines or fees co u	abide by them. I also ermit or the vehicle t	o understand that I to which it is	
Applicant	Name (print)				
Signature					
	Signature				