

UVM Supplemental Parking Permit Application

Please complete the form. We will mail your permit to the campus address below. Incomplete forms will not be processed.

Department Information

Name:

The permit will be mailed to the campus address below:

Department:

Campus Address:

Office Location:

E-mail Address: Telephone Number:

Request Information

Use the space below to explain the need for a supplemental permit.

Name of Dean, Director or Department Head authorizing need for supplemental permit:

Permit Quantity: Service Vehicle Department Business

Chartstring:

Account Operating Unit Department Fund Source Function

Projects Business Unit Project Activity Program Purpose Property

Signature

Please read the following paragraph carefully before clicking to submit. Your click to submit constitutes your legal signature and binding agreement to the terms set forth below.

The department understands they are responsible to know and comply with the University's Traffic and Parking Rules and Regulations as well as the process of appeals for citations incurred. The department understands the above permit is for the sole use of the department to which it is registered, cannot be resold, photocopied or remanufactured, and is not transferable to any individual not authorized to use the permit. The department understands in the event a permit is lost or stolen, the department will immediately notify Transportation and Parking Services. The department agrees to accept all charges for the placard and any subsequent citations issued to bearers of the placard that are a result of the department.

If you choose to submit this form via mail or fax, you must sign below:
