

University of Vermont Department of Transportation and Parking Services

38 Fletcher Place, Burlington, VT 05405

Phone: (802) 656-8686 - Fax: (802) 656-6550 - www.uvm.edu/tps

2009 - 2010 Vendor Parking Permit Application

Permit # \_\_\_\_\_

Fee \_\_\_\_\_

Cash \_\_\_\_\_

Check \_\_\_\_\_

Issued By \_\_\_\_\_

Issue Date \_\_\_\_\_

Exp. Date \_\_\_\_\_

Group \_\_\_\_\_

Please print with a ball point pen.

Company Name

Grid of boxes for company name

ADDRESS

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Email \_\_\_\_\_ Phone \_\_\_\_\_

Vehicle #1

License Plate and State boxes for Vehicle #1

Make \_\_\_\_\_

Color \_\_\_\_\_ Year \_\_\_\_\_

Style (circle one) 2D 3D 4D SW PU VN MC CV
Plate Type (choose one) Passenger Car Truck Motorcycle

Vehicle #2

License Plate and State boxes for Vehicle #2

Make \_\_\_\_\_

Color \_\_\_\_\_ Year \_\_\_\_\_

Style (circle one) 2D 3D 4D SW PU VN MC CV
Plate Type (choose one) Passenger Car Truck Motorcycle

Vehicle #3

License Plate and State boxes for Vehicle #3

Make \_\_\_\_\_

Color \_\_\_\_\_ Year \_\_\_\_\_

Style (circle one) 2D 3D 4D SW PU VN MC CV
Plate Type (choose one) Passenger Car Truck Motorcycle

Vehicle #4

License Plate and State boxes for Vehicle #4

Make \_\_\_\_\_

Color \_\_\_\_\_ Year \_\_\_\_\_

Style (circle one) 2D 3D 4D SW PU VN MC CV
Plate Type (choose one) Passenger Car Truck Motorcycle

Vehicle #5

License Plate and State boxes for Vehicle #5

Make \_\_\_\_\_

Color \_\_\_\_\_ Year \_\_\_\_\_

Style (circle one) 2D 3D 4D SW PU VN MC CV
Plate Type (choose one) Passenger Car Truck Motorcycle

Vehicle #6

License Plate and State boxes for Vehicle #6

Make \_\_\_\_\_

Color \_\_\_\_\_ Year \_\_\_\_\_

Style (circle one) 2D 3D 4D SW PU VN MC CV
Plate Type (choose one) Passenger Car Truck Motorcycle

Please indicate the number of permits requested.

Color selection boxes: Brown, Green, White

UVM Department you are working for \_\_\_\_\_ UVM Personnel in charge of project \_\_\_\_\_

Reason permit is needed (to be filled out by University Personnel in charge of project)

Vendor information lines

UVM Signature \_\_\_\_\_ Date \_\_\_\_\_

Please read the following paragraph carefully before signing below. Signing this document constitutes your legal signature and binding agreement to the terms set forth below.

I understand that I am 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. I understand that the above permit is for the sole use of the individual to whom it is registered, cannot be resold, photocopied, or remanufactured, and is not transferable to any other individual or any other vehicles than those registered above. I understand that I am responsible for all parking citations issued to any vehicle registered to me. Money must be deposited in all yellow domed meters. Parking beyond the maximum time limit on all yellow domed meters is strictly prohibited.

Mail Permit Signature \_\_\_\_\_ Date \_\_\_\_\_

Will Pick Up Operator \_\_\_\_\_