Parking Permit Application Form

Date: Day	Month	Year	

To the facilities manager

Affiliation	Job title		
Name	seal Phone number.		
Address			
Commuting distance	km Car registration number		
Car model	Regular /Light vehicle (Circle one)		
Vehicle owner	Relationship to applicant		
License numb	er		

I hereby apply for a permit to park a vehicle in the faculty parking lots (located east of the Research Quadrangles and north of the Lecture Hall) as indicated above. I promise to observe all university regulations concerning the use of the parking lots on campus.

Should I neglect carrying out the following responsibilities, I will not object to the measures taken by the university, including cancellation of the permit.

- 1. Park the car in an orderly fashion in the designated parking lot, so as not to hinder parking of other cars.
- 2. Place the parking permit inside of the windshield.
- 3. Report promptly if you have lost or soiled the parking permit.
- 4. Report promptly in writing in case of any changes to the entries of this application form.
- 5. Do not lend or transfer the parking permit to others.
- 6. Observe any other instructions given by the facilities manager.

(Attached documents required)

- 1. A copy of the driver's license
- 2. A copy of the automobile inspection certificate

(Note for Application Entries)

The vehicle owner name in this form must be the same as one recorded on the automobile inspection certificate. In the case of the owner different from you, you must clearly describe the relationship with the said individual.