

## Departmental Red Zone Permit Application

Year: 2021/2022

Department Name: \_\_\_\_\_

Dept #: \_\_\_\_\_

Contact Person: \_\_\_\_\_

Phone ext: \_\_\_\_\_

Email: \_\_\_\_\_

- **Acceptance and Use of a Parking Permit Acknowledges compliance with the terms and conditions of the PR Policy 1.2.23: Traffic and Parking.**
- **Permit application will not be processed until authorized by the Department Chair/Dean AND Vice President.**

Reason Requesting Permit (Floater/Departmental Van/Visitor Pass)

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

### Departmental Coding

Qty	Fund	Unit	Grant	Project	Object	Amount	Auth Yes	Auth No
<u>Vehicle License</u> Plate #		<u>Make</u>		<u>Model</u>		<u>Colour</u>		

\*Departmental Authorization: \_\_\_\_\_ / \_\_\_\_\_  
(Dean/Chair Signature) (Dean/Chair Print)

\*VP Authorization: \_\_\_\_\_ / \_\_\_\_\_  
(Vice President Signature) (Vice President Print Name) \* Both authorizations required to process this application

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

***For Parking Office Use Only:***

UID #: \_\_\_\_\_

Date Entered: \_\_\_\_\_

Lot Assigned: \_\_\_\_\_

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