

Departmental Service Permit Application (May - Apr)

Year: 2024/2025

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.

- 1 **Departmental Service Vehicle Permits must be accompanied by a Red Zone Permit.**
- 1 **A Red Zone permit must be purchased by staff/faculty (not using departmental funding) prior to service vehicle permit being processed.**
- 1 **Service Vehicle permits being used for FLOATER accounts must be accompanied with a Red Zone Permit (please fill out the Red Zone Permit Application form to be sent with this form)**
- 1 **Permit Application(s) using Departmental/Grant funding require approval from both the department Chair/Dean and Vice President. Applications received without approval will be returned.**

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

Departmental Coding

Qty	Fund	Unit	Grant	Project	Object	Amount	Auth Yes	Auth No
Vehicle License								
Plate # _____		Make		Model		Colour		
*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 #: _____