



# Parking Services Permit Sales Contract

Official Use Only				
<b>Lot</b>				
<b>Permit #</b>				
<b>Semester</b>				
<b>Fee</b>				

**Print Name:** \_\_\_\_\_ Card# \_\_\_\_\_ DU ID#: \_\_\_\_\_

Last                      First                      M.

**E-mail:** \_\_\_\_\_ **Contact Phone:** \_\_\_\_\_

**Employee:** Department \_\_\_\_\_ Title: \_\_\_\_\_ Office Location: \_\_\_\_\_ Extension \_\_\_\_\_

**Student:** Year In School: \_\_\_\_\_ Local Address \_\_\_\_\_

**Vehicle Information:**

**A.** \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_

Make & Model                      Registered Owner                      License Plate #                      State                      VIN  
 \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_  
 Owner's Address                      City                      State                      Zip

**B.** \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_

Make & Model                      Registered Owner                      License Plate #                      State                      VIN  
 \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_  
 Owner's Address                      City                      State                      Zip

**C.** \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_

Make & Model                      Registered Owner                      License Plate #                      State                      VIN  
 \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_  
 Owner's Address                      City                      State                      Zip

I agree to park where licensed and to display parking permit as designated inside vehicle. Drexel University is not responsible for fire, theft of or vandalism to, vehicle or content contained therein. Parking on University Facilities will be at vehicle owner's risk. The complete Parking Policy and Regulations are available on the Drexel Web pages at [www.drexel.edu/parking](http://www.drexel.edu/parking) which I have read and will adhere to.

**Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Official Use Only:**    Student    Employee    /    Resident    Commuter    /    Payroll Deduction    IOC