The University of Arizona Parking & Transportation Services **(520) 626-PARK (7275)** **(520) 621-7055 FAX** **http://parking.arizona.edu**
1117 E Sixth Street
PO Box 41750
Tucson AZ 85717-1750

AILDI Parking Permit Application

Permit valid June 4 - June 28, 2018

CONTINUING EDUCATION

Stamp & Initial Payment Method

_____IDB _____Customer Pays

_____Waive Bursar Transfer Fee

Permit Choice:

___ $49 Zone 1

___ $89 Highland Ave Garage

Pts account #_____

Lot Location Map: https://parking.arizona.edu/pdf/maps/campus-parking-map.pdf

_____

Last Name First Name Middle Initial

_____

Local Street Address Apartment Number

_____

City State Zip Code

E-mail Address:_____ Local Phone #:_____

For Office Use Only

Permit Number

Vehicle Information

For each new vehicle, attach a copy of a State issued document showing license plate number.

License Plate	State	Vehicle Year	Make	Model	VIN (for Temp Plate ONLY)

Method of Payment ***(Cash Not Accepted)***

__Check or money order ***(payable to The University of Arizona)*** Check #:_____

__Credit Card (Visa, MC, AmEx) Card Number_____ Exp Date_____

Security Code_____ **Print** name as it appears on card_____

Required for credit card payment: **Signature** _____

Lost or Stolen permits are not replaced free of charge

I certify that each and every motor vehicle registered to this permit will remain in compliance with State of Arizona Emissions Standards during the entire registration period (ARS 15-1627G). I also affirm that the information supplied on this form is complete and true. I understand that failure to comply with the requirements stated in The University of Arizona Motor Vehicle Parking and Traffic Regulations and Arizona Revised Statutes 49-542 and 15-1627G may result in the assessment of fees and fines, impoundment or other institutional enforcement and/or disciplinary action.

_____ _____

Signature **Date**