

KINGS COUNTY PARKING APPLICATION FORM

Date: _____ **Old Access Card # (If Replacement)** _____

New Permit **Replacement Permit** **Lost Permit**

GARAGE **CAMPUS**

Monthly **Reserve Monthly** **24 Hr, Reserve Monthly**

Name: (Print) _____

Address: _____

City: _____ **State:** _____ **Zip Code:** _____

Home Tele: _____ **Mobile:** _____

Work Telephone: _____ **Extension:** _____

E-mail: _____

TOUR / WORK SHIFT HOURS _____

Title: _____ **Department:** _____

Application accepted by: _____

\$30.00 Application Fee (Non Refundable) received:

Check # _____ **Credit Card**

I have received my Hang Tag, Access Card and Guidelines.

Signature _____ **Date** _____

Kings County Parking LLC
10/22/2010

Official Use Only

TAG # _____ **Permit #** _____ **Space #** _____ **Location** _____