

Please mail the completed form to: UND Parking Services, 3791 Campus Rd, Stop 8368; Grand Forks, ND 58203 or email it to Parking@und.edu

| | | |
|-----------------------------|-----------------------------------|----------------------|
| Last Name _____ | First Name _____ | Middle Initial _____ |
| EMPLID _____ | Date of Birth(MM/DD/YYYY) _____ | |
| Sponsoring Department _____ | Sponsoring Department Stop# _____ | |

| | | |
|--------------------|-------------|-----------|
| Home Address _____ | | |
| City _____ | State _____ | Zip _____ |
| Phone _____ | Email _____ | |

| | | |
|---|--|---|
| Permit Type | | |
| Permit is valid from August 1 st – July 31 st | | |
| <input type="checkbox"/> “A” & “A/S/H” Lots - \$225 | <input type="checkbox"/> RAMP, “A”, & “A/S/H” Lots - \$400 | <input type="checkbox"/> Students - \$190 |

| | | |
|---|---------------------------------|-------------------------------------|
| Primary Vehicle | | |
| License Plate # or last 8 Digits of the VIN if no plate _____ | State/Year _____ | |
| Vehicle Make/Model _____ | Color _____ | |
| <input type="checkbox"/> 2 Door | <input type="checkbox"/> 4 Door | <input type="checkbox"/> Pickup |
| <input type="checkbox"/> Van | <input type="checkbox"/> SUV | <input type="checkbox"/> Motorcycle |

| | | |
|---|---------------------------------|-------------------------------------|
| Secondary Vehicle | | |
| License Plate # or last 8 Digits of the VIN if no plate _____ | State/Year _____ | |
| Vehicle Make/Model _____ | Color _____ | |
| <input type="checkbox"/> 2 Door | <input type="checkbox"/> 4 Door | <input type="checkbox"/> Pickup |
| <input type="checkbox"/> Van | <input type="checkbox"/> SUV | <input type="checkbox"/> Motorcycle |

| | | |
|--|---|--|
| Payment Options | | |
| Choose your payment method: | | |
| <input type="checkbox"/> Cash (In Person Only) | <input type="checkbox"/> Check(Made payable to UND) | <input type="checkbox"/> Credit Card(In Person Only) |
| <input type="checkbox"/> Invoice/Voucher | | |
| Account: 623200 | Fund: _____ | Dept: _____ |
| | | Program/Project: _____ |

I certify the information is accurate to the best of my ability. I agree to abide by the University’s parking policies and procedures located on the Parking & Transportation Webpage at <https://campus.und.edu/transportation/index.html>.

| | |
|------------------|-------------|
| Signature: _____ | Date: _____ |
|------------------|-------------|

Office Use Only

| | | |
|----------------|--------------------|----------|
| Permit# | Dates Permit Valid | Receipt# |
| Date Purchased | Amount Paid | CCK/PCK |