# UNIVERSITY OF NORTH DAKOTA

## UND Parking Services "HOAPT" Permit Authorization Form

Please return the completed form to:

UND Parking Services 3791 Campus Road, STOP 8368 Grand Forks, ND 58202

UND Affiliated Lease Holder Name:	EMPLID:	
Additional Applicant Name:	Additional EMPLID (if applicable):	

#### **On Campus Apartment Address**

Street:	City:	
State:	Zip:	
Phone:	Email:	

### "HOAPT" Applicant Vehicle Information

License Plate:	State/Year:	
Vehicle Make/Model:	Color:	

As the primary permit-holder, I assert that	("HOAPT" applicant) is on	
the lease and eligible to receive a Parking Permit. I understand the permit is only valid in the assigned		
housing apartment lot, and it does not allow the vehicle to park anywhere else on the UND campus. I agree		
that any citation(s) issued to the above listed	"APT" permit and/or vehicle will be my responsibility. I agree	
that the permits will not be shared, transferred, sold, swapped, or traded. Any violation of above listed		
items may result in valid citations and/or the permits being revoked without being refunded. Any violation		
of this agreement will also be a violation of t	he Housing lease/policy. Lastly, I understand that providing	
any false information in this document is a vi	olation of the Code of Student Life and will be reported to the	
Office of Students Rights and Responsibilities		

Permit Holder Signature:	Date:	(MM,DD,YYYY)
	Date.	_(/*//*/,DD,1111)

#### **OFFICE USE ONLY**

Permit #:	Receipt #:
Date Purchased:	Amount Paid: