

PARKING SERVICES – SIUE

PARKING PERMIT REGISTRATION FORM

Permit Number _____ Date Issued _____ Issued By _____

Do Not Write Above This Line

Issued to _____
LAST NAME FIRST NAME MIDDLE INITIAL

Circle One
Faculty
Staff
Student
Grad Student
Other

Address _____
Street City State Zip Code

Student ID# _____ OR Employee ID# _____

*Vehicle Description: Make _____ Year _____ Color _____ Type _____

Lic Plate # or VIN _____ State _____

Types
2Dr(two door) STW(station wagon)
4Dr(four door) MINI(minivan)
MC(motorcycle) PU(pick up truck)
SUV(sport utility vehicle) VAN(van)

I understand that I will be held responsible for any violations involving this vehicle or permit.

Signature _____ Permit Code _____

*optional