

New  
 Renew

# Chicago Parking Request Form

Phone (312) 503-1103 Fax (312) 503-9243

E-mail: [chicagoparking@northwestern.edu](mailto:chicagoparking@northwestern.edu)

Visit our web site at [www.universityofnorthwestern.edu](http://www.universityofnorthwestern.edu)

Name Smith Jane M.  
Last First MI

School/Dept Kellogg Daytime Phone (312) 555-0134

Home/Campus Address 2100 N. Lake Shore Dr, #1210 Chicago IL 60656  
City State Zip

E-mail janesmith@myemailaddress.com

## VEHICLE INFORMATION

Exp. Date \_\_\_\_\_

Make	Plate No.	State	Deal # (Please leave blank)	Amount
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<u>Audi TT</u>	<u>D123200</u>	<u>IL</u>		
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<u>VW Passat</u>	<u>D123201</u>	<u>IL</u>		
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## ALL APPLICANTS

I agree to read and comply with Northwestern University's parking rules and regulations, and understand that the registration of a vehicle or falsification of any of the above information will void the permit.

Date 10/01/04 Signature Jane M. Smith

\*Students Only: I authorize Student Accounts to charge my account: \$ \_\_\_\_\_ JMS  
(Your initials here)

\*Faculty/Staff Only: I authorize Payroll to deduct from my paycheck: \$ \_\_\_\_\_  
(Your initials here)

McGraw Hill tickets

Train Street tickets

Inter-campus Shuttle

_____ No. of single _____	_____ No. of single _____	Exp. Date _____
_____ No. of monthly _____	_____ No. of monthly _____	

OTHER \_\_\_\_\_

FOR OFFICE USE ONLY

Parking Assignment \_\_\_\_\_ Lot A \_\_\_\_\_ Lot C \_\_\_\_\_ Lot D \_\_\_\_\_

\_\_\_\_\_ Lot E \_\_\_\_\_ Other \_\_\_\_\_

Payment (Circle one):  Cash  Payroll Deduction  Check  Student Account  CUGS

Fund - Area - Org - Object Code

Total Charge \$ \_\_\_\_\_

Authorized signature for departmental CUGS charge