



For office use only.	
Access Tag #	_____
Monthly Rate	\$ _____
Transponder Fee	\$ _____
Start Date	_____
328	Front Street – North Garage _____
329	Science Center Garage _____
330	Convention Center Garage _____
327	Front Street – South Garage _____

VEHICLE PARKING REGISTRATION

Date _____ **Email Address** _____

Name of Permit-holder _____

Correspondence Address _____

NUMBER STREET

CITY STATE ZIP CODE

Daytime Phone _____

VEHICLE

Make _____ **Model** _____ **Color** _____

Plate _____ **State/Provence** _____ **Year** _____

Terms of Agreement

I fully understand that the replacement fee for a sticker tag is \$20 and the replacement fee for a plate tag is \$50. Account cancellations will become effective on the last day of the month that follows their submission. Full monthly payment is due whenever a permit is used during a month; irrespective the number of times that permit was used during the period. This agreement constitutes a personal license for the permit-holder to park their vehicle within this facility at their own risk. No bailment is created with respect to the permit-holder’s vehicle or its contents while parked within this facility. The company, its operators and employees are not responsible for any loss or damage by fire, vandalism, theft, collision or any other cause to any vehicle or part thereof. By signing this agreement, the permit-holder acknowledges that the doors to this facility are unlocked during normal business hours. LAZ Parking encourages permit-holders to remove all valuable items from their parked vehicles. The company is not responsible for any items or contents left within any vehicle parked in this facility.

INITIALS _____

Signature of permit-holder _____ **Date** _____