



TRANSPORTATION & PARKING SERVICES
5525 SOUTH ELLIS AVENUE, SUITE 171
CHICAGO, IL 60637
773.702.8969
parking@uchicago.edu

PARKING APPLICATION

UCHICAGO ID #: _____

Name of Lot: _____

Affiliation: ☐ Faculty ☐ Staff ☐ Student ☐ Other

Name: _____
LAST FIRST

Address: _____
Street City State Zip code

UCHICAGO EMAIL: _____ DEPT: _____ PHONE#: _____

VEHICLE INFORMATION:

PRIMARY VEHICLE: _____
STATE LICENSE PLATE # YEAR MAKE/MODEL COLOR

ALTERNATE VEHICLE: _____
STATE LICENSE PLATE # YEAR MAKE/MODEL COLOR

MONTHLY PARKING RATES **NORTH CAMPUS PARKING RATE - \$90** **SOUTH CAMPUS PARKING - \$90**

My signature below indicates my understanding of the following: that (i) parking fees (which are subject to change) paid via check, cash, credit or debit card are paid in advance, monthly deductions are available to benefits eligible faculty and staff only via payroll deduction; (ii) there will be a **\$35 charge to replace my keycard/hangtag if it is lost or damaged**; (iii) payment of parking fees grants access to park in a designated lot on University property only; (iv) Ellis permit holders must have their access card with them at all times to enter/exit the garage at will; (v) partial refunds or discounts of the monthly fee(s) paid are not allowed after the purchase date; (vi) no transferring of monthly permit or access card shall be allowed; monthly parking privileges may be terminated; (vii) the monthly parking permit entitles permit holder to park only one (1) vehicle in the assigned parking location at a time; (viii) permit holders agree to adhere to all posted regulatory signs and pavement markings posted in the lot location or structure.

No allowance is made for vacations or other periods when your car will not be parked in the assigned lot or location. If your account is delinquent, your keycard may be deactivated if you park in a gated facility and/or your car may be removed by towing (at owner's expense) until payment in full is received.

Payroll Deduction Authorization

☐ By checking this box and signing below, I authorize, as of the date hereof, the University of Chicago to deduct, for my benefit, from my paycheck the prevailing rate for monthly parking expense corresponding to the permit selection that I have made above. To the full extent allowed by regulation, I request that this deduction be made on a pre-tax basis. I understand and agree that my permit fee will be automatically deducted on a monthly basis, and that these deductions will continue until I submit a written cancellation request form to the Transportation & Parking Office.

Applicant's Signature

Date

Please make all checks payable to: "The University of Chicago"

The University assumes no responsibility for damage to or loss of your vehicle or for any items or valuables left in your car while your vehicle is parked on campus.

Office Use Only:

Effective date: _____ Permit No: _____ Rate: _____ Payroll Deduction: _____ Lot Assignment _____