

Student Carpool Parking Permit Application

University of California – Davis

Please PRINT or TYPE clearly and provide all requested information.

Students must live outside of the Davis area to participate in a registered UC Davis Carpool.

For Office Use Only.

Date _____ Permit Type: CP2C _____ Permit No. _____
CP3C _____ Cost Per Person \$ _____ 00.

Please go to <http://sysweb.ucdavis.edu> to ensure your address is updated before submitting the carpool application. If your address is not updated, this will delay the issuance of the carpool permit. Personal Information/Update Address/Type of Address to Insert/Mailing--Current Address/Submit/Enter your mailing address/Submit

Please complete all requested information before submitting.

Please mark the permit validity date you are requesting: Quarter _____ Summer _____ Fall _____ Winter _____ Spring _____

Estimated Time of Arrival to campus _____ estimated time of Departure _____.

City Commuting from: _____

Grad Students Only

Annual valid thru
6/30/06 _____

Preferred Lot(s) if purchased thru 6/30/06

Lot _____ Lot _____

1. Designated Carpool Coordinator

Name: _____ Student ID: _____

Address: _____ City: _____ Zip: _____

Campus email : _____ Home Phone: _____
Cell Phone: _____

For Office Use Only.

Method of Payment: Cash _____ Check _____ Credit Card _____ TCC # _____

**Additional Carpoolers must complete the information on reverse side.
Incomplete applications will not be processed.**

Notes:

Please read before signing this form.

- We certify that the information contained on this form is true and correct.
- None of the Carpool Members live in Davis/El Macero.
- The MAJORITY of our commute trips to campus will be by carpool. This carpool is active and all members are working or attending classes during the same hours.
- We have read and will adhere to all rules and procedures in accordance with the UC Davis Carpool Policy (found in the Carpool Program Brochure).
- I know the permits assigned to use are non-transferable and may face revocation of my parking privileges if used by anyone other than myself.

Signatures

1.		3.	
2.		4.	

2. Carpooler

Name: _____ Student ID: _____

Address: _____ City: _____ Zip: _____

Campus email : _____ Home Phone: _____

For Office Use Only.

Method of Payment: Cash ___ Check ___ Credit Card ___ TCC # _____

3. Carpooler

Name: _____ Student ID: _____

Address: _____ City: _____ Zip: _____

Campus email : _____ Home Phone: _____

For Office Use Only.

Method of Payment: Cash ___ Check ___ Credit Card ___ TCC # _____

4. Carpooler

Name: _____ Student ID: _____

Address: _____ City: _____ Zip: _____

Campus email : _____ Home Phone: _____

For Office Use Only.

Method of Payment: Cash ___ Check ___ Credit Card ___ TCC # _____

All applicants must sign on front side before submitting this application.

Permits are non-transferable.

Altered Permits will not be honored by the Enforcement Officers and are subject to citation.