

Please fill out application completely. Incomplete applications WILL NOT be processed. If this permit is purchased for multiple employees, please ensure all requested information is provided for each user.

This is a	Payment Method	k				
	Departmental account:					
	☐ renewal					
new request	Personal a	iccount paid on a ur	niversity account			
Department/Faculty						
Purpose for Departmenta	<u> </u>					
Number of Permits Requi	red					
Parking Duration (parking	is sold on a calendar	· month basis):				
Monthly	t	0				
	dd/mm/yy	dd/mm	n/yy			
Annual 🔲	t					
	dd/mm/yy	dd/mm	n/yy			
Permit Type and Location	1					
	Stadium	Evening	RJC			
☐ DBHSC ☐ Other:		_				
employees. In order to dete department for additional in above includes a project ID	ermine whether a taxa formation regarding t , then the form MUS lect ID, the form must	able benefit should I the specific situation I be signed by the I be signed by the IV	losaic Department Manager			
Requester Info and Acknowledgement						
I have read, understood, ar pages of this application.	nd agree to the terms	and conditions as s	stated above and the following			
Requester Name (Please F	Print)		Signature			
Moasic Department/Project (Please print)	• •		Signature			



Terms and Conditions

Failure to comply with McMaster University Traffic and Parking Regulations can result in fines, tow away and storage of the vehicle at the owner's risk and expense, as well as the cancellation of parking privileges. Persons availing themselves of the University parking facilities must be in possession of a transponder valid for both date and designated lot.

Transponders: A transponder fee may be applied to the permit purchased for a gated lot. The transponder can be returned for a \$40 refund.

Refunds: Parking fees for current and remaining months will be refunded if cancelled the first 2 business days of the current month. After the first 2 business days, only the unused months will be refunded. NO REFUND is available on annual motorcycle permits.

Lost Transponders: A prepaid transponder that is lost, stolen or is left on a vehicle when the vehicle is sold or traded or damaged may be replaced, for a charge, by applying in person to the Parking Office.

Restrictions and Conditions: All parking transponders are issued subject to the following restrictions and conditions

- 1) Transponders are issued, as physical evidence of a discrete contract, for display when entering and parking on campus.
- 2) Transponders remain the property of the University and may be cancelled and parking privileges revoked at any time by the University.
- 3) All vehicles displaying a permit must be registered to that permit with Parking Services. Account holder is also responsible for updating parking office with any changes in vehicle/license plate information. If the permit/s are purchased for use by more than one person, the Department/Faculty must provide information and updates on any changes pertaining to each employee that has access to the permit.
- 4) Parking Services requires that applicants show their University identification card.
- 5) Applicants may also be asked to show vehicle registration certificates.
- 6) The University, through its system of lot allocation, attempts to meet the needs of authorized users. The responsibility of finding a parking space in an authorized area rests with the vehicle operator.
- 7) The University assumes no responsibility at all for loss or damage to the vehicle or its contents however caused.
- 8) The University assumes no responsibility for personal injury however caused.
- 9) Parking Services will not issue a parking transponder/permit to a driver who is suspended, has outstanding fines, or for a vehicle against which there are outstanding parking permit or/and traffic violations.
- 10) Any abuse of our staff in any medium or format will result in the suspension of your parking privileges. No refunds will be provided for parking fees.

Additional Fees: Offenses will carry an additional \$25.00 administration fee if the fine or citation for an offence has not been paid or appealed within 10 working days.

If a citation tag requires a search from the Ministry of Transportation to identify the registered owner, the costs will be recovered from the registered owner/driver of the vehicle.

All outstanding parking fines, fees and interest incurred will remain a debt to McMaster University until paid in full.

Disregard of citation may result in further fines and fees, the suspension of University Parking privileges, the tow away of vehicle and prosecution under the Trespass to Property Act of Ontario.

For McMaster University traffic and parking regualtions, refer to parking.mcmaster.ca



Driver 1:						
Last Name (Print)				First Name (Print)		
Are you a un	iversity paid	employee?	Ye:	s No_		
If yes,	If yes, will this permit represent your primary parking?					□ No
If no,	where is your	primary p	arking?			
Apt. #	Street # and	Name		City	,	
Prov.	Postal Code	Pł	none #	Ema	ail	
License Plate	e# Prov.	Make	Model	Colour	Body	
Driver's Signature MacID Employee# By signing this you are confirming that you have read, understood, and agree to the information outlined on the parking application and terms and conditions. You accept full responsibility for all citation notices issued by the university with respect to registered vehicles						
Driver 2:			-			
Last Name (Last Name (Print) First Name (Print)					
Are you a university paid employee?						
If yes, will this permit represent your primary parking?						
If no,	where is your	primary p	arking?			
Apt. #	Street # and	Name		City	,	
Prov.	Postal Code	Pł	none #	Ema	ail	
License Plate	e# Prov.	Make	Model	Colour	Body	
Driver's Signature MacID Employee# By signing this you are confirming that you have read, understood, and agree to the information outlined on the parking application and terms and conditions. You accept full responsibility for all citation notices issued by the university with respect to registered vehicles.						



Driver 3:						
Last Name (Print)				First Name (Print)		
Are you a un	Are you a university paid employee?					
If yes,	If yes, will this permit represent your primary parking?					□ No
If no, v	where is your	primary pa	rking?			
Apt. #	Street # and	Name		City	1	
Prov.	Postal Code	Pho	one #	Ema	ail	
License Plate	e# Prov.	Make	Model	Colour	Body	
Driver's Signature MacID Employee# By signing this you are confirming that you have read, understood, and agree to the information outlined on the parking application and terms and conditions. You accept full responsibility for all citation notices issued by the university with respect to registered vehicles.						
Driver 4:	-					
Last Name (F	Last Name (Print) First Name (Print)					
Are you a university paid employee?						
If yes, will this permit represent your primary parking?						
If no, where is your primary parking?						
Apt. #	Street # and	Name		City	/	
Prov.	Postal Code	Pho	one #	Ema	ail	
License Plate	e# Prov.	Make	Model	Colour	Body	
Driver's Signature MacID Employee# By signing this you are confirming that you have read, understood, and agree to the information outlined on the parking application and terms and conditions. You accept full responsibility for all citation notices issued by the university with respect to registered vehicles.						



Driver 5:				
Last Name (Print)	First Name (Print)			
` '	es No			
If yes, will this permit represent your prima				
If no, where is your primary parking?	ny panimg.			
in no, where is your primary parking.				
Apt. # Street # and Name	City			
Prov. Postal Code Phone #	Email			
License Plate # Prov. Make Model	Colour Body			
Electrice i late ii i l'ev. Marce i Medel	Colodi Body			
·				
Driver's Signature MacID Employee#				
By signing this you are confirming that you have read, understood, and agree to the information outlined on the parking application and terms and conditions. You accept full responsibility for all citation notices				
issued by the university with respect to registered veh	nicles			
Driver 6:				
Last Name (Print) First Name (Print)				
Are you a university paid employee? Yes No				
If yes, will this permit represent your primary parking? Yes No				
If no, where is your primary parking?				
Apt. # Street # and Name	City			
Prov. Postal Code Phone #	Email			
License Plate # Prov. Make Model	Colour Pody			
License Plate # Prov. Make Model	Colour Body			
3	facID Employee#			
By signing this you are confirming that you have read on the parking application and terms and conditions.				
issued by the university with respect to registered veh				