

McMaster Parking Application – Departmental Requests

Please fill out application completely. Incomplete applications WILL NOT be processed. Please print.

| | | |
|----|-------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------|
| 1. | Check One: <input type="checkbox"/> Renewal <input type="checkbox"/> New Request | Check One: <input type="checkbox"/> Departmental Account <input type="checkbox"/> Personal Account Paid on a University Account |
|----|-------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------|

If this permit is purchased for use by multiple employees of the Department/Faculty, please skip steps 3 and 7 and fill out the attached list of employees and vehicle information

| | |
|---------------|------------------------------------------------------------------------------------------------------------------------------------------------------------|
| 2. Background | Request Information: Purpose for Department Paid Parking: _____ |
| | Are any of the users for the requested permit/s McMaster University Paid Employees? <input type="radio"/> Yes <input type="radio"/> No (Please select one) |
| | If Yes to above, would the permit/s represent their primary parking? <input type="radio"/> Yes <input type="radio"/> No (Please select one) |
| | If No, where is their primary parking? _____ |

| | | | | |
|---------------------------------|--------------------------------------------------------|-------------------|-------------------------------------------------------|------------------------------|
| 3. Driver Information & Address | _____ | _____ | _____ | _____ |
| | Last Name | First Name | Employee # | E-Mail (required) |
| | Mac ID (for McMaster Staff, Faculty and Students only) | | | |
| | Permanent Address: | | Vehicle License Plate & Registered Owner Information: | |
| | _____ | _____ | _____ | _____ |
| | Apt. # | Street # and Name | License Plate # | Prov. Make Model Colour Body |
| _____ | _____ | _____ | _____ | |
| City | Province | Postal Code | License Plate # Prov. Make Model Colour Body | |

| | | |
|------------------------------|--------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------|
| 4. Duration, Type & Location | Parking Duration: (Parking is sold on a calendar month basis) | Permit Type & Location: |
| | Number of Permits Required: _____ | <input type="checkbox"/> M <input type="checkbox"/> N & P <input type="checkbox"/> Stadium <input type="checkbox"/> Ward |
| | <input type="checkbox"/> Monthly _____ (dd / mm / yy) _____ (dd / mm / yy) | <input type="checkbox"/> Evening <input type="checkbox"/> RJC <input type="checkbox"/> DBHSC |
| | <input type="checkbox"/> Annual _____ (dd / mm / yy) _____ (dd / mm / yy) | <input type="checkbox"/> Other, please specify: _____ |

| | | |
|------------|----------------------------|---------------------|
| 5. Payment | _____ | _____ |
| | Name of Department/Faculty | Chartfield String # |

| | | |
|------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------|
| 6. Authorization | Requestor Name (Please print) _____ | Department or Area Manager (Please print) _____ |
| | <small>According to the Canada Revenue Agency (CRA), employer-paid parking permits are usually considered taxable benefits to employees. McMaster University and its affiliated employers have a responsibility to ensure that all required statutory deductions are withheld on the value of taxable benefits. In order to determine whether a taxable benefit should be assessed, Human Resources will contact the department for additional information regarding the specific situation. The assessed benefit may also include the value of a transponder. Parking benefits for employees with disabilities are not generally taxable.</small> | |
| | Signature _____ | Signature _____ |

Privacy: Personal information collected in connection with this form is collected under the authority of the McMaster University Act, 1976 and will be used for the administration of parking services and other related or consistent purposes.

| | | |
|-------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------|
| 7. Sign Off | I have read, understood and agree to the above and the terms and conditions stated on the reverse side of this application. I accept full responsibility for all citation notices issued by the university with respect to registered vehicles. | |
| | _____ | _____ |
| | Date | Driver's Signature |

| | |
|--------------------------------------------------------------------------------------------|--------------------------------------|
| Mail to: E.T. Clarke Centre, Rm 102, 1280 Main Street W., Hamilton, Ontario, Canada | |
| Fax to: 905 522 5529 | Email to: parking@mcmaster.ca |

McMaster Parking Application

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 fee is non-refundable.

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 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) Security & Parking 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) Security & 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.

List of Employees and Vehicle Information

Skip this step if this permit will only be used by one driver

| | | | | | | | | | | |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------|-------------------|------------|------|--------------------|-------------|-------|---------|--------|-------|
| Driver #1 | _____ | | _____ | | _____ | _____ | _____ | _____ | _____ | _____ |
| | Last Name | | First Name | | License Plate # | Prov. | Make | Model | Colour | Body |
| | Apt. # | Street # and Name | | City | Province | Postal Code | | Phone # | | |
| | _____ | | _____ | | Mac ID, Employee # | | | | | |
| Driver's Signature <i>(by signing this you are confirming that you have read, understood and agree to the information outlined on the parking application and the terms and conditions. You will be fully responsible for all citation notices issued by the university with respect to registered vehicles.)</i> | | | | | | | | | | |
| Driver #2 | _____ | | _____ | | _____ | _____ | _____ | _____ | _____ | _____ |
| | Last Name | | First Name | | License Plate # | Prov. | Make | Model | Colour | Body |
| | Apt. # | Street # and Name | | City | Province | Postal Code | | Phone # | | |
| | _____ | | _____ | | Mac ID, Employee # | | | | | |
| Driver's Signature <i>(by signing this you are confirming that you have read, understood and agree to the information outlined on the parking application and the terms and conditions. You will be fully responsible for all citation notices issued by the university with respect to registered vehicles.)</i> | | | | | | | | | | |
| Driver #3 | _____ | | _____ | | _____ | _____ | _____ | _____ | _____ | _____ |
| | Last Name | | First Name | | License Plate # | Prov. | Make | Model | Colour | Body |
| | Apt. # | Street # and Name | | City | Province | Postal Code | | Phone # | | |
| | _____ | | _____ | | Mac ID, Employee # | | | | | |
| Driver's Signature <i>(by signing this you are confirming that you have read, understood and agree to the information outlined on the parking application and the terms and conditions. You will be fully responsible for all citation notices issued by the university with respect to registered vehicles.)</i> | | | | | | | | | | |
| Driver #4 | _____ | | _____ | | _____ | _____ | _____ | _____ | _____ | _____ |
| | Last Name | | First Name | | License Plate # | Prov. | Make | Model | Colour | Body |
| | Apt. # | Street # and Name | | City | Province | Postal Code | | Phone # | | |
| | _____ | | _____ | | Mac ID, Employee # | | | | | |
| Driver's Signature <i>(by signing this you are confirming that you have read, understood and agree to the information outlined on the parking application and the terms and conditions. You will be fully responsible for all citation notices issued by the university with respect to registered vehicles.)</i> | | | | | | | | | | |
| Driver #5 | _____ | | _____ | | _____ | _____ | _____ | _____ | _____ | _____ |
| | Last Name | | First Name | | License Plate # | Prov. | Make | Model | Colour | Body |
| | Apt. # | Street # and Name | | City | Province | Postal Code | | Phone # | | |
| | _____ | | _____ | | Mac ID, Employee # | | | | | |
| Driver's Signature <i>(by signing this you are confirming that you have read, understood and agree to the information outlined on the parking application and the terms and conditions. You will be fully responsible for all citation notices issued by the university with respect to registered vehicles.)</i> | | | | | | | | | | |
| Driver #6 | _____ | | _____ | | _____ | _____ | _____ | _____ | _____ | _____ |
| | Last Name | | First Name | | License Plate # | Prov. | Make | Model | Colour | Body |
| | Apt. # | Street # and Name | | City | Province | Postal Code | | Phone # | | |
| | _____ | | _____ | | Mac ID, Employee # | | | | | |
| Driver's Signature <i>(by signing this you are confirming that you have read, understood and agree to the information outlined on the parking application and the terms and conditions. You will be fully responsible for all citation notices issued by the university with respect to registered vehicles.)</i> | | | | | | | | | | |