

TO: Parking Facilities Users

SUBJECT: PARKING

In order to keep an accurate record of all parking patrons and assist us in recognizing illegal parkers, we would appreciate your completing the following information and returning it to the Building Services Office at your earliest convenience.

User _____ Office _____

Space # _____

Make of Vehicle _____ Model _____

Color _____ Tag # _____

(If you use an alternate vehicle, please complete the information for this vehicle also.)

ALTERNATE VEHICLE

Make of vehicle _____ Model _____

Color _____ Tag # _____