UNIVERSITY OF OREGON
Student Parking Permit Application

Last Name_________________________________________First Name_________________________________________

UO ID #_________________________________________Home/Cell #_________________________________________

Email Address_________________________________________@_________________________________________ uoregon.edu

Home Address_________________________________________Apt_________________________________________

City_________________________________________State__________Zip Code_________________________________________

Permit Duration □ 4 Terms □ 3 Terms □ 2 Terms □ 1 Term
Permit Type □ Student Daytime □ Student Overnight □ Grad Village □ Barnhart □ Riley □ Motorcycle

Vehicle Information

All vehicles displaying a permit must be registered to that permit with the Department of Parking and Transportation.
Vehicle #1 License Plate__________________________State__________Color____________________________
Make______________________________________Model________________________Model Year____________________
Vehicle Type □ 2 Door □ 4 Door □ SUV □ Van □ 3 Door Hatch □ Station Wagon □ Motorcycle □ Convertible □ Pickup

Vehicle #2 License Plate__________________________State__________Color____________________________
Make______________________________________Model________________________Model Year____________________
Vehicle Type □ 2 Door □ 4 Door □ SUV □ Van □ 3 Door Hatch □ Station Wagon □ Motorcycle □ Convertible □ Pickup

Payment Method

□ Pay now in full cash, check, Visa, or MasterCard
□ Authorize one time charge to student account
□ Veteran Affairs

Applicant Signature:_________________________________________Date____________________________

By signing above I agree to abide by the UO Parking Rules and Regulations governed by the Oregon Administrative Rules. I understand I am fully responsible for the vehicle(s) for which the permit was obtained. All vehicles I operate on campus of University of Oregon are covered by necessary liability insurance as required by Oregon law and OAR 571-010-0005 through 571-010-0140. I verify that the information I entered on this form is true and correct. Permits must be used in designated lots. If my permit is lost or stolen I agree to pay a replacement fee. Permits are non-transferable.

Office Use Only

Permit 1 _________________________________________________________________________________________
Payment Type □ Cash □ Check #__________ □ Credit □ SB □ VA
Receipt #__________________________Total__________________________Issued By__________________________Issue Date________________

Permit 2 _________________________________________________________________________________________
Payment Type □ Cash □ Check #__________ □ Credit □ SB □ VA
Receipt #__________________________Total__________________________Issued By__________________________Issue Date________________