

Non-Payroll Employee Parking Request

Use this form when an individual cannot be payroll deducted for their parking assignment
(i.e. temps, contractors, interns, federal employees, and agencies not using Beacon.)

****All Fields Must Be Completed****

Account # (Parking Use Only)				Last Name:		First Name:		MI	
Department Code: D		Employment Type: <input type="checkbox"/> Temp/Contractor <input type="checkbox"/> Federal <input type="checkbox"/> Intern <input type="checkbox"/> Other _____				Department:		Division:	
Transaction Type: <input type="checkbox"/> New Assignment <input type="checkbox"/> Renewal		Initial Assignment: Lot #: Space or Permit #:				Supervisor Name: Supervisor Phone:		Effective Date: Transponder #:	
<input type="checkbox"/> Check this box only if your information is up-to-date in our system. You may skip to the bottom and sign your application.									
Home Address									
Mailing Address:				City:		State:		Zip+4:	
Work Address									
MSC #:				City:		State:		Zip+4:	
Building Name:			Personal Phone:			Personal Email:			
Vehicle Information									
Vehicle 1	Plate #:	State:	Make:	Model:	Color:				
Vehicle 2	Plate #:	State:	Make:	Model:	Color:				
Vehicle 3	Plate #:	State:	Make:	Model:	Color:				
Payment Information									
Permit Fee: \$ _____		Payment Type: <input type="checkbox"/> Credit Card <input type="checkbox"/> Department Invoice			Comments: (State Parking Use Only) _____ _____ _____ _____				
<small>Employees who cannot be payroll deducted must pay in full.</small>		Duration of Assignment _____ <small>(We do not accept personal checks)</small>							
Terms and Conditions									
By accepting a PARKING ASSIGNMENT, the employee agrees to the following:									
<ol style="list-style-type: none"> 1. If issued a parking permit, I will display it in my vehicle at all times while in my assigned parking facility. 2. I agree to promptly notify State Parking of any changes to my account data, i.e. license plate information, contact phone numbers, etc. 3. Permit purchases are non-refundable unless a twelve month permit has been purchased. 4. Parking Hang Tag is the property of the State of NC and must be returned to the Parking Office upon renewal or separation. I will be responsible for the \$50 fee associated with lost, stolen, damaged or replacement permit. 5. I will not register a coworker's vehicle to my space/permit unless approved by the State Parking Division. 6. I will abide by the Operational Policies of the State Parking Division. 7. This is a conditional assignment - State Parking Division reserves the right to provide written termination of this assignment. 8. Parking assignment/changes are not valid until this form is received and processed by the State Parking Division. 									
_____ Employee's Signature			_____ Date			_____ Parking Coordinator's Signature			_____ Date
<i>Incomplete applications will not be processed. Application not valid without signatures.</i>									

For State Parking Use Only

Date Received: _____

Date Processed: _____