

Parking Services: Vehicle Registration

EMPLID/Student ID: _____ **Faculty/Staff** **P-14** **Student** **Other**

Name: _____
Last First

Address: _____
Street

_____ City State Zip

Plate : _____ **State:** _____ **Make:** _____ **Model:** _____ **Color:** _____

Plate : _____ **State:** _____ **Make:** _____ **Model:** _____ **Color:** _____

Plate : _____ **State:** _____ **Make:** _____ **Model:** _____ **Color:** _____

I understand that the issuance of this parking permit entitles me to park my vehicle at Northern Virginia Community College in accordance with the College parking and traffic regulations as stated on the College's parking website <https://www.nvcc.edu/parking>. I understand that it is my responsibility to promptly notify the Parking Services Office of any change to the information provided on this form.

Signature: _____ **Date:** _____

For Office Use Only: Permit #: _____ Issued by: _____	Payment Method <input type="checkbox"/> CA _____ <input type="checkbox"/> CK _____ <input type="checkbox"/> CC _____ <input type="checkbox"/> Exchange/Account <input type="checkbox"/> Senior Citizen <input type="checkbox"/> Fee Waiver <input type="checkbox"/> Update Only <input type="checkbox"/> Contractor <input type="checkbox"/> Other: _____
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