

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 nvcc.edu/parking. I understand that it is my responsibility to promptly notify Parking Services of any change to the information provided on this form. I understand that this permit can only be used to park one vehicle at the College across all campuses within a two-hour period or I risk receiving a citation.

Signature: _____ **Date:** _____

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