

RESIDENT VEHICLE REGISTRATION

Name _____ ID# _____ Permit# _____
(Office Use Only)

Graduation Year _____ Phone# _____

Academic Year Campus Address (Bldg. Only) _____

Home Address _____

City _____ State _____ Zip _____

Driver's License# _____ State _____

License Plate _____ State _____ Make/Model _____ Color _____ Yr _____

License Plate _____ State _____ Make/Model _____ Color _____ Yr _____

Westside _____ North Campus _____ York Rd _____ Eastside _____ Aquinas _____ Rahner _____

***** (Only select ONE parking option above) *****

PLEASE INDICATE YOUR PARKING PREFERENCE

PLEASE SIGN AND DATE BACK

In consideration for the parking and transportation services afforded me through the Loyola University transit system, I hereby agree to abide by the rules and regulations related to same.

I understand that violations or infractions may result in appropriate penalties including: fines or towing of my vehicle, at my risk and expense, or such sanctions, depending on the nature of the offense. A warning notice will be issued before your vehicle is towed. Any vehicle found parked in a **Handicapped area** or **Fire Lane** will be subject to **immediate towing**.

I understand further that there will be a process available by which I may appeal, to a designated appeals authority within ten (10) days for relief or redress from any sanctions imposed by the Student Administrative Services.

I accept the decision of the appeals authority as final and authorize Loyola University to collect due and unpaid fines from me by means of charging it to my **student account**.

Any falsification of information on this Student Administrative Services vehicle registration form will result in immediate termination of your parking privilege on the Loyola University campus.

Signature

Date