

## **VEHICLE REGISTRATION FORM**

TULANE PERMIT #: REGISTRATION DATE:				
PERSONAL INFORMATION	N			
NAME				
Last		First Middle DRIVER'S LICENSE #		
CELL PHONE #		TULANE EMAIL		
HOME ADDRESS		CITY	STATEZIP	
RESIDENCE HALL & ROOM	# (Residential Students	Only)		
DEPARTMENT & OFFICE P	HONE # (Faculty & Staf	f Only)		
COMPANY NAME & PHON	E # (Vendor Only)			
VEHICLE INFORMATION				
LICENSE PLATE #		STATE	YEAR	
MAKE	_ MODEL	COLOR	VEHICLE TYPE	
PERMIT TYPE – CIRCLE ON	IE.			
STAFF PERMITS	FACULTY	STUDENT	OTHER	
<\$30,000 = \$420	<\$80,000 = \$615	RESIDENTIAL = \$575	SPECIAL PERMIT = \$150	
\$30,000 <\$60,000 = \$500	\$80,000+ = \$650	COMMUTER = \$520	VENDOR = \$200	
\$60,000 <\$90,000 = \$550			MOTORCYCLE = \$350	
>\$90,000 = \$600			ADD ON MOTORCYCLE = \$60	
			RESERVED ALL HOURS = \$1300	
PAYMENT TYPE – INITIAL OI	NE	PAYROLL DE	DUCTION – INITIAL TWO	
CASH		FA	ACULTY <b>or</b> STAFF	
CHECK	_		AND	
CREDIT CARD	_	BI	-WEEKLY <b>or</b> MONTHLY	
PARKING RULES AND REG	CULATIONS CAN BE	FOUND AT HTTP://CA	AMPUSSERVICES.TULANE.EDU/	
I am stating that I am the ormy knowledge. I agree to rethat I am fully responsible fissuance, I understand that i	wner of this permit a ead and abide by the for the vehicle listed	nd all information listed Tulane University Park above. In the event the		best of
SIGNATURE			DATE	