

2016/2017 YORK UNIVERSITY PARKING PERMIT APPLICATION

Instructions

All applicants must complete this form for their 2016/2017 term and show a valid ownership for any vehicle(s) registered.

Choose and indicate Permit type, location & duration – see rate chart for options and Lot/Garage names.

Car Pool (Diamond Pool) parking is available. Please refer to our website for details.

Mail/Fax Instructions – Please send your completed application with a photocopy (front & back) of the valid vehicle ownership(s) and payment to:

KEELE CAMPUS PERMITS-MAIL TO:
York University Parking & Transportation Services
Suite 222, William Small Centre, 155 Campus Walk
4700 Keele Street, Toronto, ON M3J 1P3
Phone(416)736-5335 Fax(416)736-5874

GLENDON CAMPUS PERMITS-MAIL TO:
York University Parking & Transportation Services
Glendon College, Greenhouse
2275 Bayview Avenue, Toronto, ON M4N 3M6
Phone(416)487-6788 Fax(416)487-6806

Questions? Visit our website at www.yorku.ca/parking

Terms and Conditions

In applying for the Parking Permit indicated on this application, I hereby agree to assume all responsibilities for the vehicle(s) registered herein, to adhere to the York University Parking and Traffic Regulations as amended from time to time, and to accept all the conditions contained therein. All persons using University parking facilities are subject to the parameters set out in the applicable University Policies and Procedures and the Student Code of Conduct. I further certify that I am in possession of a valid driver's license and that the vehicle(s) registered for parking are properly licensed and insured.

All outstanding parking citations must be paid in full prior to a Parking Permit being issued. Registered owners and registered drivers (if applicable) will be sent notification of their outstanding citations. If the registered owner and/or registered driver does not respond to the notification within 30 days, the registered vehicle(s) may be subject to relocation and suspension of parking privileges. Parking & Transportation Services reserves the right to apply unused permit fees against the outstanding citations. Outstanding fees related to citations and/or service charges issued to students will be referred to Student Accounts.

All Parking Permits are issued by and remain the property of York University Parking & Transportation Services. They are solely for the use of the party to whom they were issued. Transfer by sale or exchange renders the Permit invalid. Forgery, fraud and possession of lost or stolen Permits are criminal offences. Vehicle(s) displaying forged, altered, lost or stolen Permits, will be ticketed, have Permit confiscated and face possible prosecution.

Lost and/or stolen Permits must be reported immediately to Parking & Transportation Services. If your Permit is stolen it must also be reported immediately to Security to allow for an investigation.

All requests for Permit refunds should be made directly to Parking & Transportation Services. A \$15.00 administrative fee will be applied to all Permit refunds. To obtain a refund for pre-paid, unused parking fees, Permits must be returned by the third business day of the current month – NO exceptions. Certain conditions apply to all refunds.

York University assumes no responsibility for any damage or loss to a motor vehicle or its contents, no matter how caused, while it is on University property.

Parking Permit Description & Rate Chart

USE A CAMPUS MAP TO ASSIST YOU WHEN CHOOSING YOUR LOT
 ALL PRICES ARE SUBJECT TO APPLICABLE H.S.T. AT TIME OF PURCHASE

PERMIT TYPE	4 MONTHS MAY 1-AUG 31/16 OR SEPT 1-DEC 31/16 OR JAN 1-APR 30/17	8 MONTH MAY 1-DEC 31/16 OR SEPT 1/16-APR 30/17	12 MONTH MAY 1/16-APR 30/17	SUMMER MONTHLY Per Month	KEELE CAMPUS -Lot/Garage Names & Details
Unreserved	\$324.00	\$648.00	\$972.00	\$81.00	Valid in a specified Unreserved Lot ONLY; Shoreham Drive-Lot 63, or Rideau Road-Lot 69, 24 hours daily
Outer Reserved	\$416.00	\$832.00	\$1,248.00	\$104.00	Valid in a specified Outer Reserved Lot ONLY; York Boulevard-Lot 70, Chimneystack Road-Lot 97, Albany Road-Lot 67, Founders Road East-Lot 66, Founders Road West-Lot 65, Passy Crescent-Lot 91, Pond Road-Lot 86 or Physical Resources-Lot 68, determined at purchase, 24 hours daily
Reserved	\$464.00	\$928.00	\$1,392.00	\$116.00	Valid in a specified Reserved Lot ONLY; Lumbers-Lot 73, Nelson Road-Lot 82, West Office Building (WOB)-Lot 78, determined at purchase, 24 hours daily
Vendor	TBD	TBD	TBD	N/A	To be determined at time of purchase
Motorcycle	\$324.00	\$648.00	\$972.00	\$81.00	Valid in designated Motorcycle parking areas, 24 hours daily
Parking Garage	\$512.00	\$1,024.00	\$1,536.00	\$128.00	Valid in a specified Parking Garage ONLY; York Lanes-Lot 72, Arboretum Lane-Lot 80 or Student Services-Lot 84, determined at purchase, 24 hours daily

GLENDON CAMPUS -Lot Names & Details

Unreserved	\$324.00	\$648.00	\$972.00	\$81.00	Valid in Unreserved lots; F-Lot 2 and G-Lot 1, 24 hours daily
Reserved	\$464.00	\$928.00	\$1,392.00	\$116.00	Valid in Reserved Lots; A-Lot 4, B-Lot 5 and C-Lot 15, 24 hours daily
Motorcycle	\$324.00	\$648.00	\$972.00	\$81.00	Valid in any Unreserved Lot (see Unreserved Lots above) or designated Motorcycle parking area, 24 hours daily

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PLEASE REFER TO INSTRUCTIONS ON REVERSE SIDE - FILL OUT APPLICATION COMPLETELY TO AVOID DELAYS

DRIVER INFORMATION & ADDRESS

LAST NAME _____ FIRST NAME _____ INITIAL _____ STUDENT NUMBER OR EMPLOYEE NUMBER _____
 STUDENT STAFF FACULTY EXTERNAL (Specify) _____ YORK EMAIL _____ OTHER EMAIL _____

PERMANENT ADDRESS

APT No. _____ STREET No. & NAME _____

 CITY _____ PROV _____ POSTAL CODE _____
 PHONE No _____
 (_____) _____

LOCAL ADDRESS/CAMPUS RESIDENCE/CAMPUS DEPT

APT No. _____ STREET No. & NAME _____

 CITY or ROOM No & BLDG _____ PROV _____ POSTAL CODE _____
 PHONE No _____ LOCAL/CAMPUS or ALTERNATE _____ EXT _____
 (_____) _____ X _____

Vehicle License Plate & Registered Owner Information

VEHICLE 1/REG'D OWNER

LICENSE PLATE No. _____ PROV _____ MAKE _____ MODEL _____ STYLE _____ COLOUR _____ YEAR _____
 LAST NAME _____ FIRST NAME _____ INITIAL _____

IS OWNERSHIP ADDRESS SAME AS PERMANENT ADDRESS ABOVE YES NO - IF NO, PLEASE COMPLETE ADDRESS BELOW

APT No. _____ STREET No. & NAME _____ CITY _____ PROV _____ POSTAL CODE _____
 _____ PHONE No _____
 (_____) _____

ALL VEHICLE/OWNER INFORMATION RECORDED ABOVE REMAINS THE SAME AS PERMIT PURCHASED FOR THE 2015/16 ACADEMIC YEAR. OWNERSHIP/OWNER SIGNATURE IS ON FILE.

VEHICLE 2/REG'D OWNER

LICENSE PLATE No. _____ PROV _____ MAKE _____ MODEL _____ STYLE _____ COLOUR _____ YEAR _____
 LAST NAME _____ FIRST NAME _____ INITIAL _____

IS OWNERSHIP ADDRESS SAME AS PERMANENT ADDRESS ABOVE YES NO - IF NO, PLEASE COMPLETE ADDRESS BELOW

APT No. _____ STREET No. & NAME _____ CITY _____ PROV _____ POSTAL CODE _____
 _____ PHONE No _____
 (_____) _____

ALL VEHICLE/OWNER INFORMATION RECORDED ABOVE REMAINS THE SAME AS PERMIT PURCHASED FOR THE 2015/16 ACADEMIC YEAR. OWNERSHIP/OWNER SIGNATURE IS ON FILE.

Select Permit Type, Location & Duration - See Reverse

TYPE, LOCALE, DURATION

KEELE CAMPUS **GLENDON CAMPUS** **GARAGE** **RESERVED** **OUTER RESERVED** **UNRESERVED** **MOTORCYCLE**

LOT/GARAGE NAME _____

12 MONTHS MAY 1/16-APR 30/17 **8 MONTHS** MAY 1/16-DEC 31/16 SEPT 1/16-APR 30/17 **2016 SUMMER MONTHS** (Check months required)
4 MONTHS MAY 1/16-AUG 31/16 SEPT 1/16-DEC 31/16 JAN 1/17-APR 30/17 MAY JUNE JULY AUGUST

Payment Method & Delivery Options

PAYMENT METHOD

VISA M/C AMEX CARDNUMBER _____ EXPIRY _____
 M | M / Y | Y
 CARDHOLDERS LAST NAME (PLEASE PRINT) _____ CARDHOLDERS FIRST NAME (PLEASE PRINT) _____ INITIAL _____

SIGNATURE OF CARDHOLDER _____ MAIL TO PERMANENT ADDRESS MAIL TO LOCAL ADDRESS PICK-UP AT OFFICE

PRIVACY

Privacy: Personal information in connection with this form is collected under the authority of **The York University Act, 1965** and will be used for the administration of parking services and other related or consistent purposes. If you have any questions about the collection, use or disclosure of personal information by York University, please contact: Manager, Administration - Parking & Transportation Services, Room 222 William Small Centre, (416) 736-5335.

I have read, understood and agree to the above and the terms and conditions stated on the reverse side of this application.
 I accept full responsibility for ALL citation notices issued by the University with respect to the registered vehicle(s) and/or permit(s).

DATE _____ DRIVERS SIGNATURE _____ MUST BE SIGNED BY DRIVER TO BE ACCEPTED
 M | M | D | D | Y | Y

DATE _____ REGISTERED OWNERS SIGNATURE _____ MUST BE SIGNED BY OWNER TO BE ACCEPTED
 M | M | D | D | Y | Y

FOR OFFICE USE ONLY

PERMIT No: _____
 ACCESS CARD No: _____
 NOTES: _____