

Parking Permit Application

(Please print legibly)

Name: _____ Phone # _____

Home Mailing Address: _____

City: _____ State: _____ ZIP Code: _____

Please check the appropriate box(es):

Employee: Department: _____ Employee ID #: _____

Gross annual salary:

Less than \$30,000

\$30,000.01 - \$50,000

\$50,000.01 - \$70,000

Greater than \$70,000.01

Park-n-Ride lots only (not salary based)

Off-campus office (5+ miles)

Student: CUID # _____ **All student permits must be permanently affixed to the vehicle. Students may not display a parking permit on another student's vehicle.**

Commuting from off campus

On campus Resident Hall

Lightsey Bridge

Clemson House

Thornhill Village

Calhoun Courts

Bridge Student

After 5 p.m. (Graduate Students Only)

Retired Employee

Visitor: Vehicle Tag: _____ State: _____

Fike: Annual: _____ Six Months: _____ (Fike permits are valid until June 30th or Dec. 31st)

Builder/Construction Worker (construction parking zones only)

Vendor/Sales and Repair Service Company Name: _____

Motorcycle, Moped or Motor Scooter

Parking permits are valid only for vehicles that fit within a parking space no larger than 8.5 feet wide and 16 feet wide.



Please provide the permit number and expiration date of your current state-issued disability access parking permit if you will use it to park on campus in spaces reserved for disability access.

Permit # _____ State: _____ Expiration month/day/year _____/_____/_____

Permit # _____ State: _____ Expiration month/day/year _____/_____/_____

I agree to abide by the Clemson University Parking Regulations and be responsible for all parking citations bearing a permit number issued to me. I will not transfer my permit to another person.

Signature: _____ Date: _____