## 295 SAN BRUNO OFFSITE PARKING LOT APPLICATION

						*Required	
Last Name*			F	irst Name*			
Street Address*		Apt or Box #	City*		State*	Zip Code*	
Employment (Circle One)* If 'Other', provide description:  UCSF DPH Other			<u> </u>	Work Phone * Evening/Cell Phone*			
Employment Department* Employee ID (UCSF ID or CCSF DSW#)			/#)*	E-Mail Address (also used for invoices)*			
Payment must be made via	credit card month	ly)					
/ehicle Information - Provid			-	=	= -		
your responsibility to update Form.	e this information v	with the Parkin	ng Mar	iagement Office t	by completing a ne	w Parking Registration	
License Plate #*			L	License Plate #*			
Make*			ľ	Make*			
Model*			N	Model*			
State*			S	State*			
Year*			Y	Year*			
Color*			C	Color*			
Transmetro reserves the rigl Card Holder has read agrees		_	_		npany for any reas	on it deems appropriate.	
295 San Bruno Lot Terms and Con A. Hours are 6:00am – 8:00pm M providing non-peak service to B. First violations to any of the Te C. The monthly parking rate is su D. Applicants must be assigned E. 295 San Bruno Lot Operators, parked on the premise. Dam within view. F. Vehicles parked at this site m	onday to Friday. Shuttle o and from the ZSFG ca erms and Conditions me abject to change with to work at ZSFG. Re-reg DPH and affiliated par age or theft to any vel	ampus. entioned above w 30 day notice. Ac gistration will be re ties are not respon hicle is the sole res	vill recei tivation quired e nsible fo sponsib	ve a warning. Secono fees mentioned abo every year. r theft, damage, loss lity of the vehicle's o	d incidents may result in ve apply. of vehicles or items co wner. Do not leave an	n loss of parking privileges.	

LAZ Initial & Date:\_\_\_\_

Applicant Initial & Date: \_\_\_\_\_