

The University of Georgia Parking  
Services Department  
Validation Order Form

Section 1 – Customer Information

Department \_\_\_\_\_

3 Digit Department Number \_\_\_\_\_

Contact Person \_\_\_\_\_

Campus Phone \_\_\_\_\_

Comments

Email Address \_\_\_\_\_

Section 2 – Permit Request

**PLEASE NOTE: All passes ordered will only be valid for the current parking year so please plan accordingly *no refunds* will be offered.**

*For office use only*

	Quantity	Unit Cost	Total Cost	Number on Permit(s) Issued
<b>Validation Pass</b> <ul style="list-style-type: none"> <li>• Valid in pay decks only.</li> </ul>				
<b>Daily Pass</b> <ul style="list-style-type: none"> <li>• Event surface parking.</li> <li>• Please indicate lot(s) in the comments section.</li> <li>• Will only be issued if order is approved by Parking Services.</li> </ul>				
<b>Other</b> <ul style="list-style-type: none"> <li>• Please detail request in comments and leave the unit cost and total cost blank.</li> </ul>				

Total Fee: \_\_\_\_\_

Section 3 – Payment

Cash  Check  Charge
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Charge To Department

Account Name \_\_\_\_\_

Account Number \_\_\_\_\_

I have read the guidelines for the passes I am purchasing. I understand that as the caretaker of the passes for my department, I am responsible for ensuring the passes are used correctly. I have been granted the authority to charge the permit(s) to the account listed.

Signature \_\_\_\_\_

Date \_\_\_\_\_

*For office use only*

_____ Signature of Courier	_____ Rec Number	_____ Bulk	_____ Cust #
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