

Departmental Reserved Parking Space Request

A minimum of 48 hours advance notice is required for any department requesting a reserved space(s) for a guest. All requests must be submitted via this form sent by email to the Parking office at parking@duq.edu. Based on several factors, the Parking office may not be able to accommodate all requests. If accommodations can be made, a temporary permit will be issued. It will be the responsibility of the department to pick up the permit from the Parking Office and make certain that it is given to the visitor to be displayed from the vehicle's rear view mirror. Payment for the permit will be required at the time of pick-up.

*Please note that all requests are reviewed on an individual basis and that a "reserved" spaced cannot be guaranteed by the office of Parking & DU Card Services. The office is not responsible for students/employees/individuals from moving parking cones.

The Parking Office will not reserve ADA spaces on campus. Guests of the department can utilize any available ADA space on campus with the temporary parking permit they ordered as long as they also have a valid ADA placard.

| Department/School: | | | | Contact Number: | |
|---|------------------|------------------|-----------------------------|----------------------------|-------|
| | | | | Contact Number. | |
| Contact Email: | | | | | |
| Number of Spaces: Location of Requested Spaces: _ | | | | | |
| Date(s) Reserved S | Spaces are Neede | d: | | | |
| Reserved Space Si | gn Verbiage: | If roman | t is too long, abbreviation | o will be weed | |
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| xeason for keques | | | | | |
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| DL. I. V. | CA-A- | V | W.L. | W. J. I | 6.1 |
| | | | | Model | |
| | | | | Model | |
| Plate No | State | Year | Make | Model | Color |
| Me | thod of Payment | : | | | |
| | Journal Entry: | 110010 - | | | |
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| | Each Spa | ce outside of th | ne Forbes Garag | e will cost \$8.00 per day | |
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| | | | For Of | fice Use Only | |
| | Total C | ost: Vehicle | (s) X | Days X \$8.00 = | |
| | | Permit(| | | |