

Employee Service Parking Permit Application



Customer Information

Name: _____
Last, First MI _____ UK ID number _____

Department: _____ Dept. No. _____

Campus Mailing Address: _____
Room No., Building, Speed Sort _____

Does department have leased, motor pool, or official vehicles? **YES** **NO**

Instructions

A Journal Voucher must accompany this application. JV should be valid through June 30 for the amount remaining for the permit year (monthly amount multiplied by the number of months). See permit fee schedule at www.uky.edu/transportation. Completed application must be signed by Dean, Director or Senior Administrator.

Justification

- Does employee use his/her privately owned vehicle for travel to perform **maintenance** on equipment, or to **deliver** or **install** equipment on or off the University of Kentucky campus? Do not include travel between home and workstation.
YES **NO** **Between the hours of _____ and _____**
- What is the estimated usage of privately owned vehicle to perform duties listed in item 1?
Days/month _____ Miles/month _____
- Is employee reimbursed for use of privately owned vehicle when used to perform duties listed in item 1?
YES **NO**
- Type of equipment employee installs or on which maintenance is performed: _____

- Employee's assigned workstation (building): _____
List service destination(s): _____

- Other justification: _____

Authorization

Signature of Dean, Director or Senior Administrator

Date

Name of Dean, Director or Senior Administrator (please print)

Campus Phone

Please bring, mail or fax completed form to:
Transportation Services
Parking Structure #6
721 Press Avenue
Lexington, KY 40506-0571