APPLICATION FOR TEMPORARY PARKING TO ATTEND TO FAMILY RESPONSIBILITIES FOR UNIVERSITY OF AUCKLAND STAFF

I wish to apply for parking:



Temporary parking permits for family responsibilities are intended to cover short term emergency situations.

NAME:		ID:
HOME ADF	RESS:	
PH:	MOB:	EMAIL:
FACULTY/	DEPT:	
PERIOD O	F TIME PARKING IS REQUIRED	to
Vehicle Ma	ıke:	Registration:
Reason fo	r application:	
A parki areas. spaces Please 126 Ck ms.free	ing permit allows the holder to some and demand. It does not guarantee the personal and th	
EI N PI	athan House, 24 Princes St. (grour lease send copy of receipt prior to	accepted. Payable at Ask Auckland Central, Alfred of floor at the rear, near General Library). collecting permit to Margaret Freeman. mes. Failure to do this could result in your
PERMIT charges	MUST BE RETURNED TO EQUITY OF may be added if not returned on to returned on the return of the return	
Permit I	Duration:/ To/	

Amount paid:Notes: