

MassArt Evening Only Student Parking Application

Date: _____ MassArt ID #: _____

Driver's Name: Last _____ First _____

Residential Address: _____

Home Telephone: (____) _____ Cell: (____) _____

Primary E-mail: _____

Additional MassArt Affiliation (staff, faculty, etc): _____

License Plate	State	Make (Ford, Honda, etc)	Model (Taurus, Accord, etc)	Year	Color

Please mark the semester and days in which you want parking (parking will be granted for those days in which you have class)

Fall ____ Spring ____ Summer ____

Monday ____ Tuesday ____ Wednesday ____ Thursday ____ Friday ____ Saturday ____ Sunday ____

There is **NO parking fee** for the **Fall 2020 Semester**.

Students will be placed in the **Ward St. Lot**: 135 Ward St, Boston, MA 02115

INFORMATION:

- A class schedule for the semester you are applying for **MUST** be submitted with the completed application for the application to be considered.
- Parking will be on a per evening basis and access will begin at 5pm. However, you are strongly encouraged to wait until 5:30pm to access lots as daytime staff typically works until 5pm.
- Weekend access to the Ward St. Parking Lot is included with evening parking permits.
- A submitted application does not guarantee parking and parking is awarded on a per semester basis.

AUTHORIZATION

I hereby verify that all information on this application is true and accurate.

I understand that:

- Any false information provided will automatically disqualify my application for parking.
- I understand that all permits and parking rights are non-transferable.
- I understand that parking is available on a first come, first served basis.
- I understand that submitting this application does not guarantee a parking space.

Signature: _____ Date: _____

For office use only:		
Date Received: _____	Permit Number: _____	Check/MO number: _____
Date Notified: _____	Dates Awarded: Mon ____ Tues ____ Wed ____ Thurs ____ Fri ____	Name: _____
In PB: _____ Activated: _____	Lot Assigned: _____ Total Due: _____	