

**HAMPTON UNIVERSITY  
PARKING REGISTRATION FORM**

**This form must be filled out in its entirety. All outstanding citations must be paid in full prior to purchasing current decals.**

Last Name	
First Name	
HUID #	
Local Address	
City, State & Zip	
Department	
Telephone #	

New Registration  
  
Replacement Decal  
(Old decal #) \_\_\_\_\_  
Old Decal turned in  
Lot Change  
(Old lot #) \_\_\_\_\_  
  
Registration Update

I **DO** have family affiliated with the University. If yes, name(s): \_\_\_\_\_

Relationship to registrant: \_\_\_\_\_

I **DO NOT** have family affiliated with the University

**Method of Payment:**                      Cash                      Credit Card                      Payroll Deduction

**PLEASE COMPLETE YOUR VEHICLE INFORMATION**

Vehicle #1		Vehicle #2	
VEHICLE LIC. PLATE		VEHICLE LIC. PLATE	
STATE		STATE	
PLATE EXP. DATE		PLATE EXP. DATE	
YEAR		YEAR	
VEHICLE MAKE		VEHICLE MAKE	
MODEL		MODEL	
COLOR		COLOR	
OWNER'S NAME (If diff. from registrant)		OWNER'S NAME (If diff. from registrant)	

**HANDICAP TAG: (MUST BE STATE ISSUED IN REGISTRANT'S NAME)**

STATE PLACARD #	
STATE ISSUED	
EXPIRATION DATE	

The information above is both true and accurate. I certify the registered vehicle(s) above is insured by a company licensed to do business in Virginia. I agree to notify the Traffic Administration Office if and when any of this information changes. I will read and agree to abide by the rules and regulations set forth on the HUPD website. Furthermore, I understand that obtaining or displaying a decal under false pretenses is against the Code of Conduct and any violator of this policy is subject to disciplinary action.

**SIGNATURE:** \_\_\_\_\_ **DATE:** \_\_\_\_\_

**(OFFICE USE ONLY (DO NOT WRITE BELOW THIS LINE))**

<b>Decal #1:</b> _____	Administrative	Commuter	B	_____
	Faculty/Staff Reserve	Graduate	C	_____
<b>Decal #2:</b> _____	Faculty/Staff	Resident	E	_____
	Fleet	Summer Session	O	
<b>Assigned Parking Area:</b>		Waiver Resident	G	
<b>Lot #:</b> _____				<b>Issued By:</b> _____

**Date:** \_\_\_\_\_

**DL#:** \_\_\_\_\_

**Exp. Date:** \_\_\_\_\_

**State:** \_\_\_\_\_