Gardens Point Campus
Weekend & After Hours Parking Application

(PLEASE COMPLETE ALL RELEVANT DETAILS AS INCOMPLETE FORMS **WILL NOT** BE PROCESSED)

Surname: …… Given Names: ……..

Residential Address: …… (Suburb) ……..

Postcode: …… Home Telephone Number: …… Mobile: ……..

Email address: ……..

Student Details: ☐ Full time ☐ Part time

Student Number: N☐☐☐☐☐☐☐☐-☐☐ Course:……..

Staff Details: ☐ Full time ☐ Part time Position: ……

Staff Number: S☐☐☐☐☐☐☐☐-☐☐ School/Section:…….. Ext: ……

Vehicle Details: Please enter details of **all** vehicles which may use the parking permits

Registration: ☐☐☐☐☐☐ Car ☐ M/Bike ☐ Make: …… Model: ……

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Application Considerations:

☐ Weekend Parking. Weekend parking starts at midnight Friday and runs through to midnight Sunday.

☐ Full Year $40.00 (GST inclusive) ☐ Half year $20.00 (GST inclusive) – Permit will expire June 30 or December 31

☐ After hours Parking. After hours parking is from 8.00 pm until 7.00 am Monday to Friday

☐ Full Year $11.00 (GST inclusive) ☐ Half year $5.50 (GST inclusive) – Permit will expire June 30 or December 31

☐ Public Holidays $5.50 (GST Inclusive). Public Holiday parking is 0000-2400 for each gazetted Public Holiday (10 days)

Pin Number (Cardax) THIS INFORMATION MUST BE SUPPLIED

The parking on campus makes use of your QUT Id card to access the parking areas. You need to supply your Cardax pin number. This number is located on the **back** bottom right hand corner of your ID card, under the bar code.

Pin Number: ☐☐☐☐☐☐☐ / ☐☐

Certification by Applicant:

1. I understand that it is my responsibility to clearly display the parking authorisation at all times and that I am bound by the QUT Act, statutes, rules and administrative provisions applying to traffic control within the University grounds.
2. I will inform the University Administration of any change of address or other information supplied on this form within seven days of the change.
3. I acknowledge that the vehicles are parked at the owner's risk.
4. Persons and vehicles nominated on this form are the only persons or vehicles using the University parking areas.
5. To the best of my knowledge the information supplied on this application is correct.

Signature: …… Date: ……

Office Use Only		
Entered Stamp and initials	Rank: …… Parking Area: ……	Application #: ……