

Application for Monthly Parking



Key Card User Name _____ Today's Date _____

Key Card User Address _____

City _____ State _____ Zip Code _____

Account / Business Name _____

Contact—E-mail address _____

Work Phone _____ Home Phone _____ Fax _____

Primary Vehicle License Plate # and State Issued _____ Primary Vehicle Make, Model , Color _____

Account Number _____ Key Card Number _____ Reserved Space Number (if applicable) _____

Select Garage and Type of Account

- Port Lawrence Parking Facility \$72 Monthly Key Card \$85 Monthly Key Card with Reserved Space
- Superior Parking Facility \$78 Monthly Key Card \$95 Monthly Key Card with Reserved Space
- Vistula Parking Facility \$72 Monthly Key Card \$95 Monthly Key Card with Reserved Space
- Vistula Surface Lot \$85 Monthly Key Card with Reserved Space
- Refundable Key Card Deposit \$15

Select Credit Card Payment Type

- One-time Credit Card Charge \$1.50 convenience fee
- Recurring Credit Card Charge \$1.50 /per month convenience fee

Total Amount Paid Today: \$ _____

Today's Charge Amount: \$ _____

Subsequent Charge Amount: \$ _____

*If paying with credit card,
I authorize ParkSmart to
charge my credit card as
described on this form.*

Credit Card Number (to stop Auto-pay) _____ Expiration Date _____

Signature _____

** To be added to a business account, we must receive written notice from the company's accounting department authorizing ParkSmart to bill your monthly parking charges directly to the company. Thank you.*

Method of Payment

- Cash
- Check
- Visa
- MasterCard
- American Express
- ACH Direct Debit (additional form required)
- Company Account*

-OFFICE USE ONLY-

Initial and date when items are complete:

KeyCard issued: _____

KeyCard issued (SCAN): _____

KeyCard issued (PARIS): _____

Auto-Pay started (PARIS): _____

Auto-Pay started (Skipjack): _____

Account opened: _____