

Yale University Parking & Transit

Application for Free Parking Passes

Application Date: _____

NET ID #

M

1

Last

First

Name _____

PROX # _____

Campus Phone _____

Alternate Telephone Number _____

Train Transit

Cellular _____

CT Transit YSM Car Pool

Pager _____

2

Yale University reserves the right to rescind a permit at any time, or to suspend parking in any and all lots on a temporary or permanent basis.

I understand that any parking permit issued to me is a license to park my vehicle in the designated lot at my own risk, that Yale does not undertake to provide surveillance or supervision of such lot, that my use of the parking permit will not constitute Yale a bailee responsible for theft or damage to my vehicle or its contents while on University property. I also agree that only one of my vehicles will be parked in any Yale University lot at one time, stickers issued to me as the permitted are not transferable, and that falsification of my application and/or permit may result in revocation of my parking permit.

Guidelines for free passes:

You must fax or email a copy of your receipt for the purchase of a monthly train pass or CT Transit pass.

You must be a co-parker within the YSM car pool system.

Yale Parking, & Transit

2 Whitney Ave.

1st fl. Rm.105

432-9790

Fax# 432-9796

Email:parking@yale.edu

SHM, 333 Cedar

CE-1

785-6456

Fax# 785-5603

Email:ysm.parking@yale.edu

Day tags must be properly completed. You will be towed for an incorrect date.

Parking for Yale School of Medicine will be in the Amistad Garage.

3

Signature