“No Classification” Parking Decal Form

Name: __________________________ Phone Number: __________________________

If you will be parking a vehicle anytime, anywhere at any UAF facility, a current UAF parking decal, pass or permit must be purchased and displayed on your vehicle. For more information, contact the Office of the Bursar.

Contact Information:

Mailing Address: ___________________________________________________________
________________________________________________________________________
________________________________________________________________________

Email Address: ____________________________________________________________

Select a Permit:

Single Vehicle Decal – Registers one vehicle for parking at any UAF decal required parking lot, excluding gold decal lots.

Fall/Spring decal is $200 (FPD5) expires 5/31
Annual decal is $264 (FPAS) expires 8/31

Multi-Car Decal – Registers multiple vehicles for parking at any UAF decal required parking, excluding gold decal lots. This option is not available to campus residents. Only one vehicle may be on campus at a time with this option. You may register up to four vehicles.

Fall/Spring decal is $210. (FPD6) Expires 5/31
Annual decal is $274. (FPAM) Expires 8/31

Temporary Parking Permit – Registers up to four vehicles for an extended period of time.

Office Use Only
Temporary Permit
Active Start Date: _________________ Active End Date: _________________

Vehicle Registration – Same vehicle(s) on file.

Vehicle #1: License Plate #: __________ State: ______ Make/Model/Color/Year:________________________
Are you the: Registered Owner or Driver

Vehicle #2: License Plate #: __________ State: ______ Make/Model/Color/Year:________________________
Are you the: Registered Owner or Driver

Vehicle #3: License Plate #: __________ State: ______ Make/Model/Color/Year:________________________
Are you the: Registered Owner or Driver

Vehicle #4: License Plate #: __________ State: ______ Make/Model/Color/Year:________________________
Are you the: Registered Owner or Driver

Payment Options:

Checks - You may mail to the Bursar Office for payment attached for $________________________
Include your mailing address information: Street address: __________________________ City __________ State: ______ Zip: __________

**Credit Card payment is only available at the Parking Website at Parking Online http://uaf.edu/finserv/bursar/parkingservices/. We no longer take payments over the phone or at the Bursar's Office.

I agree to follow the UAF parking rules and regulations as outlined in the Parking Manual posted online at http://uaf.edu/finserv/bursar/parkingservices/. I promise to pay attorney’s fees and other collection costs, which may be based on a percentage at a maximum of 40% of the debt, necessary for the collection of any amounts owed to University of Alaska. If I do not pay, University of Alaska may take my Permanent Fund Dividend under Alaska Statutes 14.40.251 and 43.23.073 and pursue other collection methods.

Signature __________________________ Date __________________________

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UAF is an AA/EO employer and educational institution.