



**SUBMIT COMPLETED FORM TO THE PARKING & TRANSPORTATION SERVICES OFFICE.
601 SOUTH COLLEGE ROAD • WILMINGTON, NC 28403-5914 • 910.962.3178 • WWW.UNCW.EDU/PARKING**

**University of North Carolina Wilmington
2017-2018 Faculty/Staff/Non-student Vehicle Registration Form**

SELECT: NEW CHANGE

1. Please complete the following fields.

First Name: _____ Middle Name: _____ Last Name: _____
 Department Name: _____ Department Address: _____
 Campus Phone: _____ UNCW ID Number (850 #) _____ UNCW E-Mail Address: _____
 Hire Date (If New Enrollee): _____

2. Please indicate your license plate number. (Use no spaces or hyphens.)

License Plate Number: _____ State: _____ Make: _____ Model: _____ Color: _____
 License Plate Number: _____ State: _____ Make: _____ Model: _____ Color: _____

3. Select the permit registration option according to your salary, permit type and payment type (monthly/annual).

REGISTRATION OPTIONS AND TIERS	STANDARD SPACE		PARKING DECK SPACE	
	Monthly Deduction*	Annual Fee	Monthly Deduction*	Annual Fee
Faculty/Staff Reserved Parking (Limited Eligibility)	<input type="checkbox"/> \$52.91	<input type="checkbox"/> \$634.92		
Salary/wages > \$90,000.01	<input type="checkbox"/> \$43.33	<input type="checkbox"/> \$519.96	<input type="checkbox"/> \$49.58	<input type="checkbox"/> \$594.96
Salary/wages > \$65,000.01 and <= \$90,000.00	<input type="checkbox"/> \$34.16	<input type="checkbox"/> \$409.92	<input type="checkbox"/> \$40.41	<input type="checkbox"/> \$484.92
Salary/wages > \$40,000.01 and <= \$65,000.00	<input type="checkbox"/> \$24.16	<input type="checkbox"/> \$289.92	<input type="checkbox"/> \$30.41	<input type="checkbox"/> \$364.92
Salary/wages > \$25,000.01 and <= \$40,000.00	<input type="checkbox"/> \$12.16	<input type="checkbox"/> \$145.92	<input type="checkbox"/> \$18.41	<input type="checkbox"/> \$220.92
Salary/wages <= \$25,000.00 and Part-time permanent employees	<input type="checkbox"/> \$ 3.75	<input type="checkbox"/> \$ 45.00	<input type="checkbox"/> \$18.41	<input type="checkbox"/> \$220.92
Part-time faculty and SPA temporary employees		<input type="checkbox"/> \$ 45.00		<input type="checkbox"/> \$220.92
<input type="checkbox"/> Retiree <input type="checkbox"/> Phased Retiree		See Parking Office		
<input type="checkbox"/> Adjunct Faculty/Staff (Receives no benefits or salary)				

Handicap Permit Placard Number: _____ State: _____ Expiration Date: _____
 Temporary Registration Fee (\$10 per week) \$ _____ Cash Check Credit Card

**Parking Permit Fees for permanent faculty/staff are incurred at a monthly rate. For example, if you have a salary greater than \$40,000.01 and less than or equal to \$65,000.00 and purchase a standard space parking permit in January, your monthly payroll deduction would be \$24.16 for 9 months (total payments = \$217.44).*

4. I, the undersigned, agree to abide by all regulations, ordinances and laws governing the safe and lawful operation and parking of a motor vehicle on the campus of UNCW including payment of citations and fees. Note: Registration is not complete until the parking permit is displayed in accordance with prescribed regulations.

Signature _____ Today's Date MM/DD/YY _____

Office Use Only

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Primary Permit Number

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Secondary Permit Number

Payment Method: Payroll Deduction Cash Check Credit Card Interdepartmental Invoice