



Today's Date ____/____/____

Parking Office: 600-4307/600-1986
Parking Fax: 600-1984

All applicants are subject to a waiting list for offsite locations only.

FOR OFFICE USE ONLY

Employee Number:

- CPMC Employee
- Sutter Employee
- Tenant Employee
- Contracted Employee
- House Staff
- Allied Health
- Physician:
 - Full Service (unlimited hrs)
 - Courtesy (68hrs max)
 - Other: _____
 - Carpool
 - Vanpool

Parking Location Request

- Pacific
- California (Ends 12-31-19)
- Davies
- Mission Bernal
- 1101 VNC MOB
- 1101 VNC Hospital
- Other

Last name: _____ First: _____ Middle In. _____

Office Address: _____ City: _____ Zip: _____

Home Address: _____ City: _____ Zip: _____

Department _____ /Title _____ / Ste/Rm # _____

Contact# _____ /Email _____ /Campus _____

Vehicle #1

Vehicle #2

MAKE	MODEL	COLOR	LICENSE PLATE	MAKE	MODEL	COLOR	LICENSE PLATE
/	/	/	/	/	/	/	/

Department Use Only

- Payroll Deduct
- Invoice
- Credit Card
- Courtesy

IMPORTANT - PLEASE READ

By completing this contract CPMC Sutter Health does not guarantee parking availability and reserves the right to cancel and or revoke monthly parking agreements at any time. Rates are subject to change with a 30-day notice.

LIABILITY

This contract is a license usage of one (1) vehicle at the assigned rate, for the designated areas, at sole risk of the vehicle owner. Only license for space is granted. No bailment is created. We do not guard or assume any responsibility for theft loss, or any other damage to your vehicle or its contents. If an attendant asks you to leave your vehicle unlocked and keys we are only then responsible for theft of, or to a maximum of \$250 for the loss or damage to your vehicle or its contents caused by our active or other negligence. We are not responsible for theft, loss, damage or injury caused by any faulty condition or by your operation or care of your vehicle, for damage or losses reported after the vehicle has left the premises.

CONDITIONS

- No long term storage permitted over 48 hours unless approved by Parking Management. Unauthorized storage may be towed or booted at owner's expense.
- Decals and parking cards are not transferable. Transferring will result in loss of parking privileges.
- Monthly parking fees are due by the first of each month. If payment is not received by the due date monthly access will be deactivated and daily parking fees will be in effect. Late fees will apply until all past due charges are paid in full.
- Replacement of lost, stolen or damaged access card will result in an undisputable non-refundable fee.
- The signer accepts the responsibility to contact the Parking Office to make changes or to terminate their parking. Otherwise, we will continue billing the account.
- Any violation of the above terms or conditions will result in immediate lost of parking privileges.
- For additional information on this policy visit our intranet at <http://mysutter/SHWBR/CPMC/Pages/default.aspx>

****Upon verification and approval, applications will be processed within 5 to 10 business days****

(Signature) _____ (Date) _____

I HAVE READ AND AGREE TO THE ABOVE

IMPORTANT MESSAGE: DO NOT EMAIL OR FAX CREDIT CARD INFORMATION