

LOST/DAMAGED PERMIT DECLARATION FORM
(REPLACEMENT CARD £10)

I _____ hereby declare that I have lost my
(Print Name)

Permit card No:

On Date:

Staff/Student No:

Signed:

Date:

(Permit Holder)

The University has the right to vary tariffs at any time in the future subject to notifying staff/students in advance.

Anyone discovered to be passing/selling permits may be subject to disciplinary action.

Completed forms should be returned to carparks@ulster.ac.uk

Office Use Only

Approved by:
(Name & Title)

Date:

Amount Paid:

Date:

Receipt No:

Method of payment:

Cash:

Cheque:

Credit Card:

Debit Card:

Replacement No: