



# CAL STATE LA

PARKING & TRANSPORTATION SERVICES

## Event Parking Request

The Event Parking Request Form must be submitted to Parking Services **14 calendar days** prior to the date of the event.

Please complete this form and submit via email to [parking@calstatela.edu](mailto:parking@calstatela.edu)

Event Name				Date of Request			
Department or Sponsor			Contact Person			Extension	
Date of Event	Begin Time	End Time	Location of Event				
Number of Attendees	Parking Attendant Requested Yes _____ No _____ Time _____ to _____		Number of Permits*	Desired Parking Lot			
Dept will distribute permits Yes _____ No _____	Parking Waiver requested? Yes _____ No _____	College or Division	Charge Back Acct Number Dept Fund      Dept ID      Program      Project 660951-      -      -      -				
Funded by;		UAS	USU	ASI	Foundation	Alumni	Campus

### Signage

Sign Type and cost per sign*	Quantity	Sign Text Note: Please be specific. All signs subject to review.
Black/White \$15		
Color logo only \$18		
Complete color \$20		
Electronic Marquee \$20 (displayed 1-7days as requested)		

### Guests

(For additional guests please attach a list)

First and Last Name	First and Last Name
First and Last Name	First and Last Name
First and Last Name	First and Last Name

### Special Description or Notes:

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Parking Services will send you a confirmation of receipt of form within three business days. You may also be contacted regarding questions about this form.

For questions please call (323)343-3704

**\*A 7.5% administrative fee will be added to the total cost.**

Department of Public Safety/Welcome Center  
5151 State University Dr. Los Angeles, CA 90032-8560  
Phone (323) 343-3704