



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

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:

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

***An 8.5% 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