Boise State University
Parking Transportation Services
1910 University Drive
Boise, ID 83725-1290
426-1681 Fax 426-3343

Vendor/Contractor Permit Request

Company Name: _____ Date: _____

Mailing Address: _____

_____

Contact Person: _____ Phone #: _____

Annual Permit Yes ☐ No ☐ If No Valid Dates(s): _____

Fleet Vehicles: Yes ☐ No ☐

Receipt of payment required prior to permit release.

Payment Enclosed: Yes ☐ No ☐

Cost: 1st Permit 149 / Year
Each add. Permit 34 / Year

# of Permits Requested: _____

If permits will be used in individual vehicles, please include the information below:

Name	License #	Vehicle Make	Vehicle Model	Color