Duke University
Parking & Transportation Services (PTS)
Parking Validation Order Form

Use this form to request parking validations from Parking & Transportation Services (PTS). Please monitor your stock and place your order well in advance. Large single-use ticket orders may take several days to prepare. Multi-use passes may take up to two weeks.

For orders of 50 single use tickets or fewer, bring or fax (919-684-4768) this form to the Customer Services Center in the Duke Clinic, beside the Medical Center bookstore, between 7:30am and 5pm weekdays, or follow the instructions for larger orders below. Only the Duke Clinic location can process small orders while you wait.

For single use ticket orders over 50, or multi-use scan-able passes, email or fax (919-681-7746) the completed form to tranpark@duke.edu with the subject “Parking Validation Order,” or bring it to 2010 Campus Dr. between 9am and 5pm weekdays. Please note that the Campus Drive location cannot fulfill small orders while you wait.

**Important**: PTS will prepare the order and advise when it is ready for pickup at 2010 Campus Dr. **Parties picking up their order must provide the cost center used to place the order.**

<table>
<thead>
<tr>
<th>Date</th>
<th>Department</th>
</tr>
</thead>
<tbody>
<tr>
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</table>

**Authorized requestor’s name**

**Cost center**

**Company code**

**Billing address**
(Duke Box Number, Street, City, State, Zip)

**Email to be notified for pickup**

**Contact phone number**

**Single Use Validation Ticket**

| O Full Day | O 1 Hour |

**Multi-use scan-able pass* (For use by departments indicated only)**

<table>
<thead>
<tr>
<th>Pink Smock Gift Shops:</th>
<th>O 10-Use pass O 5-Use Pass</th>
</tr>
</thead>
<tbody>
<tr>
<td>O Volunteer Services</td>
<td>O Pastoral Services</td>
</tr>
<tr>
<td>O Pediatric Social Work (“Peds passes”)</td>
<td></td>
</tr>
<tr>
<td>O Adult Bone Marrow Trans</td>
<td>O Child &amp; Family Mental Health</td>
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**Quantity**

**Remarks**

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**For PTS Use Only:**

Encoded by (print name) ___________________________ Expiration date ___________________________

Date encoded ___________________________ Validation type ___________________________

Batch number(s) ___________________________

Customer notified order complete on (date) ___________________________