

Parking Validation Order Form

Use this form to request parking validation tickets or scan-able cards. Monitor your stock and place your order well in advance. Validations ordered now will expire June 30, 2019.

If you need to exchange expired validations, the maximum count eligible for exchange per fiscal year is thirty (30).

Instructions: Scan and email the completed form to tranpark@duke.edu. In the subject line, write **Parking Validation Order**. We will prepare the order and advise when it is ready for pickup at 302 Science Drive (Science Drive Garage).

Important

- **Do not duplicate** your order. If you cannot email your order, you may fax it to 919 681-7746. Walk-in orders are discouraged.
- Parties picking up their order **must provide the cost center** used to place the order.
- For single-use tickets, **a minimum of 15 of any give type is required.**

For orders of 15-50 single use tickets, you may bring this form to the Customer Services Center in the Duke Clinic, beside the Medical Center bookstore, between 7:30am and 5pm weekdays. *Only the Duke Clinic location can process small orders while you wait.*

Date	Department	
Authorized requestor's name	Contact phone number	
	Email to be notified for pickup	
Cost center (cannot be split)	Company code	
Billing address (Duke Box Number, Street, City, State, Zip)		
Single Use Validation Ticket Types (Large orders may take several days to prepare)		
<u>PG1, PG2, PG3, Research Dr. Garage</u> <input type="checkbox"/> 1 Hour, \$2 <input type="checkbox"/> Full Day, \$8 <input type="checkbox"/> Service Recovery, \$8 (billed on use) <input type="checkbox"/> Cancer Ctr, Full Day, \$8 Discounted <u>Science Dr. Garage</u> <input type="checkbox"/> Full Day, no charge (JB Duke Hotel only)	<u>PG4</u> <input type="checkbox"/> 1 Hour, \$1 (available to Duke Stores only) <input type="checkbox"/> 1 Hour, \$2 <input type="checkbox"/> Full Day, \$8 (\$12 value – Departments Only) <input type="checkbox"/> Full Day, \$12 <input type="checkbox"/> Reserved Visitor Space Full Day (no charge) Reserved space number(s): _____ _____	
Multi-Use Scan-able Pass Types (For use by departments indicated only; allow 2 weeks lead time)		
<input type="checkbox"/> Adult Bone Marrow Transplant (30 uses) <input type="checkbox"/> Cancer Center (5 uses) <input type="checkbox"/> Child & Family Mental Health (5 uses) <input type="checkbox"/> Donor Relations (5 uses)	<input type="checkbox"/> Chaplain Services (40 uses) <input type="checkbox"/> Peds Pass (30 uses) <input type="checkbox"/> Volunteer Services (100 uses)	
Quantity desired	Remarks	Expired Validation Exchange <input type="checkbox"/>

For PTS Use Only

Encoded by (print name) _____ Expiration date _____

Date encoded _____ Validation type _____

Batch number(s) _____

Customer notified order complete on (date) _____