

EMPLOYEE PARKING PASS REQUEST

Gov't

Ground Handler

CLT/CLT VIP

Other

LEO

* REQUEST:	Express Deck Self Park \$400 Crew Surface Lot \$100	Employee Sur Replace/Lost		Replace/Lost Hangtag \$25 Deactivate Parking Pass		
PLEASE PR	INT OR TYPE CLEARLY	Ø = ZERO	O = LETTER	1 = ONE	I = LETTER	
*EMPLOYEE N	NAME			TIT	`LE	
	EMAIL					
EMPLOYER _		PHONE		CLT ID#		
Are you a cu	manently assigned to CLT? YE Irrent Employee Parking Pass ho lacing a current Employee Pass h	lder? YES NO nolder? YES	NO			
	is the name & card # of employe				First Care	d #
PLEASE PR	INT OR TYPE CLEARLY	Ø= ZERO	O = LETTER	1 = ONE	I = LETTER	
LIC. PLATE 1	State Plate # MAKE	MODEL	COLOR	_OLD PLATE (IF	UPDATE)	_
* LIC. PLATE 2 _	State Plate # MAKE	MODEL			UPDATE) DRY TO GAIN ACCESS TO LO	
		CLT SECTION	N			
CARD ACCES	SS #	HANG	G TAG #			
DATE PROCE	ESSED	RECE	IVED	URE	DATE	
		EMPLOYER SEC	TION			
*AU	THORIZED SIGNER/DELEGATE (PRINT)	AUTHORIZED	SIGNER/DELEGATE (SIGNATURE		DATE	_
	SIGNER TITLE	WORK PHO		EMPLOYEE	SIGNATURE	
*COMPANY	BILLING CONTACT		PHONE			
	DRESS					_
BILLING FM				G AGREEMENT	 #	

*Required Information

ORGANIZATION:

Airline

Concessionaire

All Employee Parking is billed to the employer.