

Recharge Request for Campus Provided Goods, Services, or Entertainment

Form Ref No. _____

Request Date:

Unit Providing Service/Goods: TAPS Contact Name: TAPS Sales Office Phone: 9-4543 Email: tapssales@ucsc.edu

Unit Requesting Service/Goods: _____ Requestor Name: _____ Phone: _____ Email: _____

<p>Description of Goods and/or services</p> <p>Specify permit type and quantity: _____ Full day Permit (\$10) _____ 4 Hour Permit (\$5) _____ Official Use (\$990)</p> <p><small>**The maximum order quantity is 50 permits **Please note; these guest permits are not to be used by staff, faculty, or students</small></p>	<p>Delivery option:</p> <p><input type="checkbox"/> Send permits to Kiosk for individual guest to pick up <input type="checkbox"/> Requestor will pick up permits at Sales Office (photo ID required) <input type="checkbox"/> Another person will pick up permits at Sales Office (photo ID required) - Name: <input type="checkbox"/> Mail to campus mail stop** - Please specify:</p> <p><small>**Please note; by selecting Campus Mail, you are acknowledging that TAPS is not responsible for any items lost or stolen. Permits lost in the mail cannot be refunded or replaced.</small></p>
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I attest that state funds are not being used to purchase parking permits for students, staff, faculty, and/or other affiliates of the University.

Any special instructions for guests (specify pick-up date):

Required FOAPAL Information:

Index	Fund	Org.	Account	Activity	Debit 'D'	Credit 'C'	Description	Doc Ref

Authorization for Charge (Debit)

Authorization for Credit

Submit this recharge form to: tapssales@ucsc.edu

