

State of Nebraska
 Administrative Services, State Building Division
CARPOOL REGISTRATION AGREEMENT



AS/SBD Parking Services
 1526 K St, Suite 200
 Lincoln, NE 68508
 (402) 471 - 0492

OSOB – Parking Services
 1313 Farnam St
 Omaha, NE 68102
 (402) 595 - 2115

OFFICE USE ONLY	
Date Assigned	_____
Facility/Stall	_____ / _____
Lot / Stall:	_____
Prox Card / Hang Tag No.	_____
1st AVI Sticker No.	_____
2nd AVI Sticker No.	_____
3rd AVI Sticker No.	_____
4th AVI Sticker No.	_____

1. Applicant Legal Name:
 Agency No. and Name:
 Office Address:
 Employee email address:

Employee No:
 Office Phone No.:
 Driver's License :

CARPOOL MEMBERS:

2. Applicant Legal Name:
 Agency No. and Name:
 Office Address:
 Employee email address:

Employee No:
 Office Phone No.:
 Driver's License :

3. Applicant Legal Name:
 Agency No. and Name:
 Office Address:
 Employee email address:

Employee No:
 Office Phone No.:
 Driver's License :

4. Applicant Legal Name:
 Agency No. and Name:
 Office Address:
 Employee email address:

Employee No:
 Office Phone No.:
 Driver's License :

The use of any assigned parking facility shall be at the carpool permit holder and additional carpool members risk. AS/SBD shall not be responsible for personal injuries or liability for loss resulting from fire, theft or damage to any vehicle or article left therein. Only license is granted hereby and no bailment is created.

I hereby warrant that the above information is true and, upon assignment at a parking facility or lot, authorize the required fee be deducted from carpool permit holder's earnings each month. I am responsible for such fee(s) until said parking privileges are terminated or State employment ends.

I have read and understand the parking policy, including how to terminate my parking assignment and the process to stop payroll deductions.

Signature: _____

Date: _____

Print this form, sign and date legibly, then deliver the original to Parking Services, State Building Division.