## PARKING PERMIT APPLICATION AND VEHICLE REGISTRATION

\*The cost is \$100.00 per year(\$50 for 2<sup>nd</sup> Semester only) and NO REFUNDS will be issued\*

\*You must complete the online process and pay through RevTrak \*

Prepare the following items to SUBMIT AS A PDF

\*\*\*PHOTOS AND SCANNED DOCUMENTS ARE NO LONGER ACCEPTED\*\*\*

\*A & B requires 2 signatures: Student & Parent or Guardian\*

A. \*Parking Application (available online)\*

B. \*Parking Contract (available online)\*
C. Copy of a VALID DRIVER'S LICENSE
D. Copy of VEHICLE REGISTRATION
E. Copy of VALID INSURANCE PROOF
F. Copy of RevTrak Receipt

upload to HHSPARKING@paulding.k12.ga.us upload to HHSPARKING@paulding.k12.ga.us upload to HHSPARKING@paulding.k12.ga.us upload to HHSPARKING@paulding.k12.ga.us

An application will <u>not</u> be considered complete and cannot be processed without <u>ALL ITEMS</u> listed above complete with signatures, valid dates for proof of insurance and vehicle registration, a copy of the student's valid driver's license and <u>ALL ITEMS</u> submitted as a <u>PDF</u> to <u>HHSPARKING</u> @paulding.k12.ga.us.

## CHECK ALL DATES ON SUBMITTED DOCUMENTS EXPIRED DOCUMENTS WILL NOT BE ACCEPTED!!!!

All documents must be submitted to HHSPARKING @paulding.k12.ga.us

## **INSTRUCTIONS FOR FILING:**

This application is for registering a vehicle by the student for the purpose of securing a parking space. Rules and regulations pertaining to on-campus parking and operation of a vehicle are contained herein. Completion of this application shall be construed as acceptance of the parking and operation rules and regulations. Students who elect to drive a vehicle shall complete this application. Applications will be subject to review and approval by the principal or a designee. Applications will be kept on file.

**TYPE** IN YOUR INFORMATION ON THE LINE PROVIDED, Upload required HHSPARKING@paulding.k12.ga.us \*You MUST pay online through RevTrak. NO CASH OR CHECKS ARE ACCEPTED\* LAST NAME FIRST NAME INITIAL DOB GRADE Street Address/Apartment No. Applicant's Driver's License Number State Year Make of Vehicle Model (Name & No.) **Body Style** Color-Vehicle Vehicle Tag Number Vehicle Insurance Company & Policy # After reading and understanding the rules and regulations as stated on the reverse side, the undersigned acknowledges that permission to drive and/or park an automobile on the school campus is a privilege and not a right. In consideration for such privilege, the undersigned expressly consents to any searches of the above-described vehicle or any other vehicle driven by applicant. Administrators of the school may search the vehicle for any reason, at any time, while said vehicle(s) is on school property. Signature of Driver/Applicant: Signature of Parent/Guardian:

## TO BE COMPLETED BY THE SCHOOL:

Vehicle Registration, Driver's License and Insurance Verified By\_\_\_\_\_

Parking PERMIT/SPACE Number

Date Permit ISSUED \_\_\_\_\_ RevTrack - Amount Paid \$\_\_\_\_\_