

American Tobacco Campus & Diamond View 1 Monthly Access Card and Parking Individual Contract

Please Print Information
All Sections Must Be Completed

To Be Completed by Triangle Transit Staff

ATC Company: Triangle Transit Badge ID: _____

Name: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Daytime Phone #: _____ Alt Phone #: _____ Email: _____

American Tobacco Campus and **Triangle Transit** hereby grant parking privileges for _____ vehicle(s) in the **North** Parking Deck.

Parker Agrees to the following terms:

1. Parker is required to pay a **\$15.00** refundable deposit to Triangle Transit. Parker shall forfeit refund if Access Card has not been returned within one year of last use.
2. There will be a **\$20.00** charge for replacement of lost or unreturned Access Cards.
3. Parker must notify the Triangle Transit upon cancellation of agreement. Parker will receive notification if the Access Card has not been used for 120 days. Access Card shall be deactivated 30 days following notification if Parker has not contacted Triangle Transit.
4. Parking is only valid for the above named parker.

Additional Terms:

American Tobacco Campus and **Triangle Transit** assume no liability for fire, theft or damage in any case, except through our own negligence. All damage claims must be presented before vehicle is removed from facility. Vehicles should be locked at all times and valuables should not be left in vehicle.

Parker agrees to abide by any and all regulations pertaining to the use of the facility as may be prescribed from time to time by **American Tobacco Campus**, and further agrees to allow parking of vehicles in any area within the facility designated by **American Tobacco Campus** (unless reserved signage is issued).

This agreement becomes effective on ___/___/___ and may be cancelled by either party.

I agree to all terms set forth in the above contract:

Parker

_____/_____/_____
Date

Vehicle Information

Please list all vehicles that apply:

Make & Year: _____ Model & Color: _____

State: _____ License Plate #: _____

Make & Year: _____ Model & Color: _____

State: _____ License Plate #: _____