REQUEST FOR CIVIC CENTER PARKING PERMIT

(INDICATE NUMBER OF REQUESTED PERMITS)

WHITE 2-hour (Central Honolulu) WHITE 2-hour (Outside Central Honolulu) Billing Address:		WHITE 4-hour (Central Honolulu)		
		WHITE 4-hour (Outside Central Honolulu) (4-Hour Permits = \$20 Charge Per Month		r Permit)
Department:				
Division: Branch / Unit:				
Office Address:	Building Location, Stro	eet Address		
Total Number of Employ Contact Person: Phone No.:	_			
Recommend:	[] APPROVAL	[] DISAPPROVAL		
Parking Coordinator:	Signature		Date	
DAGS Automotive Mana	Of agement Division Permit No(FFICE USE ONLY s) Issued:	EFFECTIVE DATE	EXPIRE DATE
WHITE 2-hour (Central H	Honolulu)			
WHITE 2-hour (Outside	<u> </u>			
MUITE 4 hour (Ocate 11	Jonaluki)			
WHITE 4-hour (Central F WHITE 4-hour (Outside (Control Handlele			
Revised 07/2022				