

# Parking and Transit Bus Request Policy

In order to use the UL Transit buses, organizations must agree to the following policies:

- Buses must be requested at least 2 weeks in advance in Parking and Transit—Olivier Hall. This does not guarantee the availability of the buses but does allow Parking and Transit to arrange for a driver. Buses will be available on a first come-first served basis.
- Organizations will be billed for any additional time that goes over the requested time.
- Be as accurate on times as possible. At times the buses will be used for other events between pick up and drop off times and inaccuracies in the request will lead to problems.
- Damages to the buses will be charged to the organization requesting use unless the responsible party can be identified. Disciplinary action may be brought based on the code of student conduct for damages to University Property.
- Approximately 42 people per bus. Parking and Transit reserves the right to decide on the number of buses based on the number of participants.
- If the pick-up is at Sorority Row, passengers will meet the buses on Coliseum Dr.
- If the organization has not remitted payment after 30 days, the faculty representative listed will receive a bill for services.
- Buses will be charged at \$50 per hour with a 2 hour minimum.

Organization making request \_\_\_\_\_

Faculty/Staff representative \_\_\_\_\_ Home phone\_(\_\_\_\_)\_\_\_\_\_

Department \_\_\_\_\_ Office phone number\_(\_\_\_\_)\_\_\_\_\_

Organization billing address \_\_\_\_\_

Organization contact for event \_\_\_\_\_ (\_\_\_\_) \_\_\_\_\_  
(Name and contact phone number)

Back-up \_\_\_\_\_ (\_\_\_\_) \_\_\_\_\_  
(Name and contact phone number)

## Event Information:

Name of Event \_\_\_\_\_

Date of Event \_\_\_\_\_ Location of Event \_\_\_\_\_  
(include City/State)

Pick-up location \_\_\_\_\_ Pick-up time \_\_\_\_\_ am / pm

Bus departure time \_\_\_\_\_ am / pm Event start time \_\_\_\_\_ am / pm

Event end time \_\_\_\_\_ am / pm Drop-off time \_\_\_\_\_ am / pm

Number to be transported \_\_\_\_\_ Handicap Accessibility request \_\_\_\_\_

## Faculty Representative

\_\_\_\_\_  
(Signature)

\_\_\_\_\_  
(Print Name)

## Organization Representative

\_\_\_\_\_  
(Signature)

\_\_\_\_\_  
(Print Name)