## EVENT REQUEST FORM

### VISITOR

**Daily Visitor Permit**  
$10.00/Day - Attendees at on-campus events  
Not valid at meters or pay lots.

**Pay by Space**  
$2/ 1st hr, $1/ each additional 30 mins, $10/day  
Single Visitor / Small Groups; Hourly parking

**Pay Lot**  
$2.00/Hr, $1.00/ each additional 30 min, $10.00/day  
Located on Main Campus & Centennial Campus

### DEPARTMENTS ONLY

**Voucher Sticker Validations (Pay Lots only)**  
Single Visitor / Small Groups - Parking 2 hours or less. $2.00 Each; Purchased in multiples of 40  
Coliseum Deck or Dan Allen Deck pay lots

**Guest On-line Permit**  
$5.00/Day - Online account required.

**Validation Codes**  
$2.00/Hr per code; purchase in multiples of 50  
Single Visitors / Small Groups; Designated locations

### REQUEST FORM

**Event Name:** ____________________________  
**Event Contact:**  
  - **Name:** ____________________________  
  - **Phone:** ____________________________  
  - **Email:** ____________________________  
**NC State Affiliation:** _______________________  
**Event Participants:** _______________________

**Event Location:** ____________________________  
**Loading / Unloading Area:** ________________  
**Permits Needed:**  
  - Car_________ Bus_________ Van__________  
**Items requested for price quote:**  
  - Signs____ Cones____ Reserved spaces____  
  - Traffic attendents____Traffic officers_____  

### CAMP INFORMATION

*If your event will have a large group arrival (youth / athletic camps) or a daily drop-off, please complete the section below.*

1) **Arrival Location:** ____________________________  
   **Date:** _________ **Time:** ____________

2) **Departure Location:** ____________________________  
   **Date:** _________ **Time:** ____________

3) **What vehicles will be used for drop off and pick up?** ____________________________

4) **Number of Participants** _________________

5) **Will guest stay overnight?** ________________

6) **Will your event have on-site Registration?** _________________

7) **Will your event have daily visitors?** ____________________________________________

### PAYMENT INFORMATION

- [ ] CASH  - [ ] CHECK  - [ ] CREDIT CARD

**DEPARTMENT BILLING #** ________________  
**BOOKKEEPER’S NAME** ________________  
**YOUR NAME** ________________  
**YOUR EMAIL** ________________  
**YOUR PHONE** ________________

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**CONTACT**

NC State Transportation Department  
Events  
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