香港大學物業處
Estates Office
The University of Hong Kong

| For Official Use Only | EF83C (03/25) |
|---|---|
| Received on: | |
| Label No.: | |
| Expiry Date: | |
| Fee: | |
| Approved by: | |

Please read the guidelines for application (EF83C1) carefully before completing this form. All items should be completed in BLOCK LETTERS. For Enquiry, please email to parking@hku.hk.

(*Please tick or cross as appropriate)

To: Security and Parking Unit

# Application for Class C parking Label

**Part I Eligibility**

Staff members of LKS Faculty of Medicine whose applications are supported by the Faculty, and can only park at the Faculty of Medicine Building

**Part II Particulars of Applicant**

1) Name of Applicant: (Prof / Dr / Mr / Mrs / Miss*)_____
(Surname) (Given name)

2) Position Held: _____ (Title) _____ (Staff number)

3) Department:_____

4) Contacts:_____ (Direct) _____ (Office) _____ (Email)

5) Parking Start Date:_____(DD/MM/YYYY)

6) Disabled User * ☐ No ☐ Yes *(Guidelines item 8)*

**Part III Details of Application**

7) Type of Application*
☐ Renewal ☐ New Application
☐ Change of Vehicle Details -------- (Current registration number: _____)
☐ 2nd vehicle label *(Guideline item 13)*

8) Vehicle Registration Number :_____

9) Vehicle Make & Model:_____

10) Vehicle Ownership* ☐ Self ☐ Family Member ☐ Company
(Vehicle must be owned by the applicant or by his/her family member. If the vehicle is owned by his/her company, please provide a certified authorization letter from them. For new application or change of vehicle details, a copy of vehicle registration is required to be attached to this application form)

11) Overnight Parking required *: *(Guideline item 10 & 11)*
☐ **No:**
☐ **Yes:---** ☐ Sep – Nov ☐ Dec – Feb ☐ Mar – May ☐ Jun – Aug

**Part IV Declaration of the Applicant**

I have read and acknowledged the Guidelines for Application for Class C Parking Label (EF83C1). I agree to observe the **Administrative Arrangements for Traffic and Parking on University Estates** and I agree that the University shall not be liable for any theft of or damage to vehicles parked on its properties whether caused through the negligence or breach of contract committed by the University or its staff or agent. I also agree to bear all liabilities for any indemnity against all damages, injuries and losses on the University Properties caused by or in connection with the above-mentioned vehicle.

_____

Date Name of Applicant Signature