

REFUND REQUEST FORM

NAME _____
(Please Print)

ADDRESS _____

If you have any outstanding parking fines, your refund will be applied to your balance due.
Any credit remaining will be refunded to you by check.

RUID # _____ PERMISSION # _____ TICKET # _____

Overpayment of fines	_____	Overpayment of Permission	_____
Change in permission type	_____	Graduated in December	_____
Withdrew from Rutgers	_____	Other	_____

Explanation: _____

Requester's Signature / Date

OFFICE USE ONLY

Customer Service Representative / Date Hangtag _____ Sticker _____

REFUND AMT. APPROVED: _____ FINE _____ PERMISSION _____

REFUND AMT. DENIED: _____ REASON _____

APPROVED BY: _____ DATE _____