



California State University, Sacramento
University Transportation & Parking Services
(UTAPS)

Lost or Stolen Permit Report Form

Sacramento State is not responsible for lost or stolen permits. If a permit is lost or stolen, UTAPS will place the permit on a fraudulent use list upon completion of this report form. You may request to replace your lost or stolen permit for a one-time fee of \$20 at our office located in the Welcome Center. For more information on lost or stolen permits, please visit www.csus.edu/utaps.

Last Name: _____ First Name: _____ Middle Initial: _____

Sacramento State ID: _____ Phone Number: (____) _____ - _____

Please complete one (1) of the following applicable sections

STOLEN

Provide Details of Theft

List of Other Stolen Items (if applicable)

Was the vehicle locked prior to theft? Yes No Was there evidence of forced entry? Yes No

Date of Theft: _____ Time of Theft: _____ Location of Theft: _____

Reported to: _____ Report Number: _____ Date: ____/____/____

Please attach a copy of the police or insurance report, if applicable.

LOST

Provide Details of Loss

OTHER

Provide Details

The undersigned acknowledges that the original parking permit referenced below is no longer valid and will be enforced as a fraudulent permit if displayed. Vehicles displaying a permit that has been reported to the University Transportation & Parking Services (UTAPS) office as lost or stolen are subject to issuance of a 3B.2 Fraudulent/Unauthorized Use citation for **\$133. Initial Here** _____

The undersigned acknowledges that reporting false information to University Transportation & Parking Services (UTAPS) may result in revoked parking privileges, fines and/or corrective measures implemented by Student Affairs under Title 5, Article 2. The original permit referenced below will be replaced for a one-time fee of \$20 for that semester only. Should the replacement permit become lost or stolen, every permit thereafter during that semester will be replaced for the current parking fee at the time of purchase.

For more information on permit fee proration schedules, please contact the University Transportation & Parking Services (UTAPS) office at 916-278-PARK (7275).

Signature of Reporting Party: _____ **Date:** ____/____/____

For UTAPS Office Use Only

PERMIT VERIFICATION

Original Permit Number: _____ Date Assigned: ____/____/____

New Permit Number: _____ Date Assigned: ____/____/____

Replacement Approved Yes No \$20 Fee

Permit Recovered (Check box if permit has been recovered & returned to UTAPS) Date Recovered: ____/____/____

Please Circle All That Apply:

<i>Student Semester</i>	<i>F/S Semester</i>	<i>F/S 24 Month</i>	<i>F/S 20 Month</i>	<i>Emeritus</i>	<i>Renaissance</i>
<i>Motorcycle</i>	<i>Residence Hall</i>	<i>Carpool</i>	<i>USGS</i>	<i>ASI/Hornet/Teaching Associate</i>	<i>MPP</i>

Comments

Report Taken By: _____ **Date:** ____/____/____