Quad Cities International Airport (MLI) Parking Card Application

TO BE COMPLETED BY APPLICANT:

LAST NAME		
FIRST NAME		
ADDRESS		
CITY, STATE, ZIP		
PHONE:	Home:	Cell:
E-MAIL		
EMPLOYER		

Card Number:	
Expiration Date:	

Parking Card Fee:	\$75
Card Not Returned:	\$200
Monthly Parking Fee:	\$15

1. If I lose, damage, or have my Parking Card stolen, I will notify the MLI Parking Dept. immediately (see below).

2. This Parking Card must be returned upon resignation, termination, or upon the demand of an authorized MLI representative, to the MLI Parking Dept.

3. A \$200 fee will be charged if your Parking Card is not returned

3. I understand that my Parking Card is non-transferable. Misuse of the Parking Card could result in permanent revocation of parking privileges.

4. I understand that parking fees (if applicable) are due at the beginning of each month. Parking access will be terminated if payments are past due.

5. If parking access is removed for non-payment of fees, a \$25 reinstatement fee will be charged.

6. I understand that I am responsible for paying the monthly parking fee (if applicable) until my Parking Card is returned to the MLI Parking Dept.

7. I am responsible for notifying the MLI Parking Dept. (see below) of any change in my personal information.

9. If issued a MLI Parking Card, I agree that by signing below, I have read and accepted the above terms.

APPLICANT SIGNATURE

Metropolitan Airport Authority % Parking Card Department P.O. Box 9009 Moline, IL 61265 Phone: (309) 757-1746

Office Hours 7 am - 3:30 pm

Closed weekends and all major holidays

DATE

** TO BE COMPLETED BY MLI PARKING DEPARTMENT **

< PAYMENT INFORMATION

PAID BY: Cash / Check/CC

BILL TO:

PARKING CARD FEE: \$75.00 MONTHLY PARKING FEES: TOTAL:

< ID RETURNED?

YES_____ DATE:_____

NO _____ BILL \$200.00 FOR NON-RETURNED PARKING CARD