

Quad City International Airport (MLI)
Parking Card Application

Card Number:

Expiration Date:

TO BE COMPLETED BY APPLICANT:

LAST NAME

FIRST NAME

ADDRESS

CITY, STATE, ZIP

PHONE:

Home:

Cell:

E-MAIL

EMPLOYER

Parking Card Fee:

\$75

Card Not Returned:

\$200

Monthly Parking Fee:

\$25

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

DATE

Metropolitan Airport Authority% Parking Card Department
2200 George Kirk Dr Suite 100
Moline, IL 61265
Phone: (309) 757-1768

Office Hours

8 am - Noon

1 pm - 4:30 pm

Closed weekends and all major holidays

**** 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**