



Official Business Request

Requestor: _____

Department: _____

Mail Code: _____

Building: _____

Room Number: _____

Phone Number: _____

Email: _____

Payment Information Summary:

PeopleSoft Number: _____

Document I. D. Number: _____

Alternate Payment Info.: _____

Business Office Contact: _____

Number of OBPs Requested: _____

Cost of requested OBPs: (\$100 each X number of permits)

Print and fax this completed form to 404-385-3246 or mail to Parking & Transportation Dept.,
MC0441, Attn: Debraca "Dee" Shelton.