



LUKE PIN AGREEMENT

NAME: _____

MAILING ADDRESS: _____

PHONE NUMBER: _____

- **Your PIN is only valid at long-term LUKE machines.**
- **Your PIN is only valid for a period of six months. After this six month period you will need to contact our office to renew your PIN number.**
- **The long-term LUKE machines will only allow you to utilize your PIN once per day.**
- **The Parking Commission reserves the right to terminate and/or deny the PIN holder a new PIN at any time for any reason deemed necessary by Parking Commission staff.**

You must provide the following in order to be eligible for a long-term LUKE PIN #:

Place of Employment: _____

OR

Downtown Residence Address: _____

License Plate Number: _____

Signature & Date

Chosen PIN Number

Your PIN number needs to be two letters followed by four numbers

Ex. (AB1234)