

**Minnesota State University, Mankato
Parking & Traffic Services**

Parking Permit Loss Report

Name: _____ Phone: _____

Street Address: _____

City/State/Zip: _____

Date and Time Occurred: _____

Place Occurred: _____

Tech ID#: _____

I declare that **Minnesota State Mankato parking permit #:** _____

assigned to me has been _____ lost, _____ stolen, under the following circumstances:

Describe: _____

If possession of original lost/stolen permit is retained, the permit must be returned to the Cashier's Office. Failure to do so will constitute fraudulent use as outlined below.

I understand fraudulent use or possession of, or complicity in the use of a lost or stolen Minnesota State Mankato parking permit is punishable by administrative sanctions authorized by Minnesota State Mankato and/or criminal prosecution under Minnesota Criminal Code.

I further understand Minnesota law provides that persons making false reports to law enforcement authorities may be punished by imprisonment in jail for not more than 90 days or a fine not to exceed \$1000, or both (MS609.505).

I hereby certify that this report is true and correct to the best of my knowledge. I further understand that a permit, even though assigned, remains the property of the University and enforcement actions as a result of this report will be at the discretion of the University or its agent, Parking & Traffic Services.

I understand that if the lost/stolen permit is found, it will NOT be displayed but returned to the University Cashier's Office.

Signature of Complainant

REPLACED BY # _____

Witness/Cashier

Date

Time