ELIGIBILITY EXEMPTION APPLICATION

To obtain an exemption on the eligibility requirements on your monthly permit, please provide the following information as it is required. The submission of this form does not guarantee the issuance of an eligibility exemption. Each case will be reviewed.

PERSONAL INFORMATION

Name: _____

Contact Number: _____ Email Address: _____

TAP Card #: _____ Permit #: _____

EXEMPTION INFORMATION

Requested Exemption Dates (Start Date – End Date): _____

Reason for requesting exemption:

_____
_____
_____
_____
_____
_____
_____
_____
_____
_____

Please provide any documentation to support reason. For example, flight/bus/hotel reservation information, etc.

Submit completed form, additional documentation and/or questions to customerservice@iparq.com.