

## Exhibitor Parking Permit Request

**Event Services** 

1000 Water Street, Jacksonville, FL32204 Office: (904) 630-4000 Fax: 904) 630-4029

Email: POCCservicedesk@asmjax.com

Effective: Events after 1-1-24 to 12-31-24

tomer Information:						
Event Name:				Event Dates:		
Exhibitor/Compar	ny:			Booth #:		Fax:
Contact Person:		Cell phone:		E-mail:	_	
Address:		C	ity, State, Zip	:		
ment Information:						
Credit Card:	□ Amex Visa/MC Discovery CC#:				Ехр. С	)ate:/
	PARKING PASSES WILL BE	SENT DIGIT	ALLY TO TH	IE CELL # ON TH	IS FORM	
Quantit ¥	<u>Descriptio</u> n		Floor Orde			Amount
	4-day event; Auto (each)		\$32.00	per permit	\$	-
	4-day event; Trailer		\$32.00	per permit	\$	-
	(each)	Sta	te: Pe	ermit #:		
	Trailer Tag #:		\$24.00	per permit	\$	_
				per permit	\$	
	3-day event; Auto (each)			ermit #:		
	3-day event; Trailer					
	(each)					
	Trailer Tag #:	_				
	2-day event; Auto (each)		\$16.00	per permit	\$	-
	2-day event;Trailer		\$16.00	per permit	\$	-
	(each)	Sta	te: Pe	ermit #:		
	Trailer Tag #:	_				
	RV Parking (no utilities provided)		\$30.00	per day	\$	-
	Trucks (>14 ft & <26 ft)		\$30.00	per day	\$	

Total \$ -

NO Multi-day passes sold at Parking Lot entry. Trailers are to use 1 parking space. There is limited Parking for RV's which will take 2 parking spots.

All applicable tax is included.