Topeka Surface Lot Transfer Request

Please Type or Print Legibly

I hereby request that my name be placed on the transfer list for a parking space on the State lot(s) specified.

______________________________  ________________________
Date  Lot(s) #

______________________________  ________________________
Last Name  First Name  Initial  Employee ID #

______________________________
Agency or Department

______________________________
Agency Mailing Address – Street, Building, Floor, Room Number

______________________________
Work Email

______________________________
Work Telephone Number

**State Lots:**
Lot #1 (Judicial Center Lot) is bordered by 10th and 12th Streets, Jackson Street and Harrison Street.
Lot #2 is bordered by 10th and 11th Streets, Harrison Street and Topeka Boulevard.
Lot #4 is bordered by 11th and 12th Streets, Harrison Street and Topeka Boulevard.
Lot #7 is located at 7th and Van Buren.
Lot #8a is located south of ESOB and Lot 8b and 8c are north of ESOB.

______________________________
Parking Use Only

Date entered into T2__________________________  By:__________________________