



MSUB Police Department  
406-657-2147  
Monday-Friday 8:00am-5:00pm

## Vehicle Storage Application/Authorization

MSU Billings (MSUB) offers vehicle storage for current faculty, staff, and students during academic breaks. Vehicles will be stored in a specific area determined by the MSUB Police Department.

### Release:

- \*I agree to release MSUB from any responsibility for damage that may occur to my stored vehicle. Damages may include any loss of items stored within the vehicle, damage to the vehicle, or theft of vehicle.
- \*I understand that MSUB never intended, nor designed the specified storage areas to be a secured area. These parking areas are not locked, secured, or guarded.
- \*I agree to assume full responsibility for property damage while the vehicle is being stored.
- \*I agree to abide with the Parking Policies and Procedures of MSUB.
- \*I agree that I am responsible for citations or towing expenses the vehicle may accrue while my vehicle is stored.
- \*I agree to leave a vehicle key with the MSUB Police Department office. Business hours are Monday-Friday, from 8am-5pm. Vehicle key is for the operation of stored vehicle in an emergency.
- \*I agree to pick up the vehicle key during MSUB Police Department office hours. If an after-hours pickup is required, contact the MSUB Police Department at 406-657-2147.
- \*I agree to list a local contact person, with phone number, to be contacted in case of an emergency. This contact person may assume responsibility for my vehicle.

### Storage Requirement

- Vehicle MUST have a valid permit through the storage period.
- Vehicle MUST have a valid permit visibly displayed during storage.
- Vehicle MUST be in good working condition.
- Stored vehicle may not be parked in a hazardous manner or manner that interferes with daily operations.
- MSUB reserves the right to impose parking citations and may tow my vehicle while vehicle is stored.
- Vehicle must be picked up by date listed on form or to extend storage, prior to pick-up date listed, contact MSUB Police Department.

### Customer Information

Full Name: \_\_\_\_\_ Student ID#: \_\_\_\_\_  
Address: \_\_\_\_\_ City: \_\_\_\_\_  
State, Zip: \_\_\_\_\_ Cell Phone #: \_\_\_\_\_  
\*Local Contact Name: \_\_\_\_\_ \*Phone#: \_\_\_\_\_

### Vehicle Information

License Plate #: \_\_\_\_\_ State: \_\_\_\_\_ Permit#: \_\_\_\_\_  
Make: \_\_\_\_\_ Model: \_\_\_\_\_ Color: \_\_\_\_\_ Year: \_\_\_\_\_

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Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Begin Storage Date: \_\_\_\_\_ Pickup Date: \_\_\_\_\_

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Office Use Only: Approved Initials \_\_\_\_\_ Keys: \_\_\_\_\_ Date: \_\_\_\_\_

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Pick Up-Customer Signature: \_\_\_\_\_ Date: \_\_\_\_\_