

Flight Crew Parking Application

This parking tag/card allows you to park one vehicle in the Long-Term Parking Lot (or other designated area) at your sole risk. Blue Grass Airport does not agree to safeguard your vehicle or assume care, custody or control of your vehicle or its contents. Blue Grass Airport is not responsible for fire, theft, damage or loss to your vehicle or its contents. Only a permit to park is granted hereby, and no bailment is created. You agree to defend and indemnify Blue Grass Airport for any casualty to your vehicle or its contents and for any other type of loss including reasonable attorney fees.

PARKING RULES & REGULATIONS

- 1. Parking fees are due by the first of the month owed and are subject to change. If not paid by the fifth business day of the month, parking privileges are subject to cancellation.
- 2. Parking tags/cards are non-transferable. Use of a parking tag/card by anyone other than the authorized user may result in cancellation of parking privileges.
- 3. Parking tags/cards must be used to enter the facility. Vehicles entering without the use of an access device are subject to the maximum daily rate.
- 4. User should not take tickets from ticket machine. If you don't have your parking tag/card with you, please notify the parking attendant via the intercom. If you have to take a ticket to gain entrance, please submit the ticket at the Parking Exit Kiosk.
- 5. The primary designated parking area is the Long-Term Parking Lot. However, other lots may be designated from

time-to-time at the discretion of the airport.

- 6. User agrees to report any damage caused by their vehicle to the Integrated Operations & Coordination Center at 859.425.3112.
- 7. All payments are non-refundable.







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Date:		
Name:	Employer:	
Address:		
City, State, Zip:		
	E-Mail:	
VEHICLE DATA		
Make:	Model:	
Color:	Plate #:	
PARKING PASS TYPE ☐ Initial ☐ Renewal ☐ Lo	st Pass Replacement (\$30 fee)	
PARKING PASS TERM LENGTH ☐ \$120 Semi Annually (\$20/mont	h) 🗖 \$240 Annually (\$20/month)	
PAYMENT METHOD Cash Credit Card # (Las	st four digits only):	
I AGREE TO ACCEPT MONTHLY PAR	KING PRIVILEGES UPON THE PROVIDED RULES & REGULA	TIONS.
Customer Signature:	Date	e:
	For employees only:	
Pass # Assigned:	Pass Received Date: Vo	ılid Until:

RETURN THIS COMPLETED FORM TO THE PARKING EXIT KIOSK. (See attached map.)

