



MIAMI – DADE COUNTY, ISD PARKING OPERATIONS
MONTHLY PARKING KEY CARD/HANGTAG

CANCELLATION FORM

ISD Parking Management
Cancellation Form - Receipt
Date Received: _____
ISD Staff Signature: _____
Customer Signature: _____

PLEASE PRINT INFORMATION

NAME _____ KEY CARD NUMBER _____

HOME ADDRESS _____ HOME CITY/ZIPCODE _____

HOME PHONE _____

WORK ADDRESS _____ WORK CITY/ZIP CODE _____

WORK PHONE _____ EMPLOYER NAME _____

VEHICLE MAKE/MODEL _____ VEHICLE YEAR _____ VEHICLE TAG _____

VEHICLE COLOR _____ COUNTY VEHICLE # _____

(County Vehicles Only): INDEX CODE _____ (Journal Entry Accounts Only)

MIAMI-DADE COUNTY EMPLOYEES ONLY:

I AM EMPLOYEED WITH MIAMI-DADE COUNTY _____ DEPARTMENT _____

I WILL NO LONGER BE EMPLOYEED WITH MIAMI-DADE COUNTY _____

EMPLOYEE I.D. # _____ LAST FOUR NUMBERS OF SOCIAL XXX-XX-_____

Please note, all Cancellations **MUST** be made in writing. We will not cancel any Monthly account by verbal communication. Either a Cancellation Form must be completed at the ISD Parking Office or a written request faxed to our office requesting to have the account cancelled (305) 579-4597. You may also complete your Cancellation Form online at http://www.miamidade.gov/gsa/about_downtown_parking.asp.

As stated above each patron is responsible to ensure they cancel his/her account. Parking fees will continue to be charged until proper cancellation documents are received at the ISD Parking Office.

OFFICE USE ONLY
DO NOT WRITE IN THIS SPACE

KEY CARD CANCELLATION DATE _____ FACILITY ASSIGNED _____

KEY CARD RETURNED YES _____ NO _____ KEY CARD REFUND AMOUNT _____

REFUND MAILING ADDRESS _____

AS400 SYSTEM ON _____ SMART CARTRIDGE ON _____ SECURITY ACCESS LEVEL _____

COMMENTS: _____