

**OPB****Office of Parking and Badging**  
*Division of Capitol Square Services*

dgs.virginia.gov

## Coordinator Designation Form

All agencies in DGS operated facilities must have designated coordinators.  
This form must be returned to the DGS Parking Services and Building Access Section.

<b>ACTION REQUESTED</b>			
<input type="checkbox"/>	New Designee Remove Previous:	<input type="checkbox"/>	Updated Contact Information
<b>COORDINATOR INFORMATION</b>			
First Name:		Last Name:	
Title:			
Agency:			Agency Number:
Building Name/Address:		Fax:	
Work Phone:		Alternate Phone: (after-hours emergencies)	
Email Address:			
<b>ACTION REQUESTED</b>			
<input type="checkbox"/>	Primary Agency Parking Coordinator (only one per agency)	<input type="checkbox"/>	Secondary Parking Coordinator (may have multiple)
<input type="checkbox"/>	Primary Agency Parking Coordinator (only one per agency)	<input type="checkbox"/>	Secondary Parking Coordinator (may have multiple)
<input type="checkbox"/>	Primary Agency Parking Coordinator (only one per agency)	<input type="checkbox"/>	Secondary Parking Coordinator (may have multiple)
<b>FACILITIES</b> (Please list the buildings(s) and floors(s) your agency occupies)			
Building Name:		Floor(s):	
Building Name:		Floor(s):	
Building Name:		Floor(s):	
Building Name:		Floor(s):	

The undersigned acknowledges his/her responsibility to comply with the policies issued by the Department of General Services.

<b>Coordinator Signature:</b>	<b>Date:</b>
<b>Agency Head or Designee Signature:</b>	<b>Date:</b>

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Entered By: \_\_\_\_\_ Date Entered: \_\_\_\_\_