Ambler Payroll Deduction Authorization for Employee Parking Hantag Pre-Tax Form

NAME:_________________________________________ TU ID #:_____________________________________
INTEROFFICE TELEPHONE:_______________________ EMAIL:_____________________________________

I hereby authorize the Office of Parking Services to START / CHANGE / STOP my payroll deductions for Employee Parking. I understand that, to the maximum extent possible, my payroll deductions shall be made on a before-tax basis, subject to the terms and conditions of the Temple University Before-Tax Employee Parking and Transportation Benefit Program (the “Program”). (Refer to your Benefit Program Description for the maximum amount you may contribute on a before-tax basis and the effective date of the election.) I understand that my payroll deductions for parking will continue as described above for subsequent months unless I change it by filing a new Payroll Deduction Authorization form within the time limit described in the Benefit Program Description. I understand that if for any reason my payroll deductions are not processed on time, I am required to pay daily parking fees to use a parking area.

CHOOSE APPROPRIATE PAY CYCLE AND PARKING PAYROLL DEDUCTION PLAN

MONTHLY PAYROLL DEDUCTION PLANS

PKR Ambler Monthly ($60.00 over 2 pays)

BIWEEKLY PAYROLL DEDUCTION PLANS

PKR Ambler Biweekly ($30.00 over 4 pays)

CHANGE PARKING FROM _____________________________ to ________________________________

EMPLOYEE SIGNATURE:________________________________________________ DATE: _________________________

FAXED TO MAIN CAMPUS OFFICE AT EXT. 1-4934 DATE: __________ INITIALS ______

FOR MAIN CAMPUS OFFICE USE ONLY

ONE TIME ADJUSTMENT

MONTHLY PRETAX DEDUCTION

MONTHLY PRETAX REFUND

BIWEEKLY PRETAX DEDUCTION

BIWEEKLY PRETAX REFUND

PAY PERIOD ENDING ____________________________ AMOUNT $______________________________

Initials/Date Sent to Information Management : ________________________________

Initials/Date Entered/Changed/ Locked Out/ Deleted in T2 Flex : ________________________________

Initials/Date Entered/Changed/Deleted in Parker : ________________________________

Supervisor: ____________________________ Date: ________________________________
Ambler Campus Parking Registration Form

Temple University employees and students that park vehicles, including motorcycles, on the Ambler Campus must purchase a parking permit and agree to abide by the following rules and regulations:

1) My permit must be displayed inside my vehicle, on the back of the rearview mirror. If you utilize multiple vehicles, the permit must be transferred to the vehicle being driven. Vehicles found without the appropriate registered permits are subject to citation and enforcement procedures.

2) If you require parking on the Main Campus, any current Ambler permit can be used at the Montgomery Garage, located at 1859 N. 11th Street (11th Street between Montgomery Avenue and Berks Street) on a Part-Time parking basis. Part-Time parking requires a deposit of funds into your parking account prior to use. Attempting to park at the Montgomery Garage without sufficient funds will result in the assessment of the hourly rate.

3) No overnight Part-Time parking is permitted at the Liacouras or Montgomery Garages.

4) The permit will be honored at assigned parking areas through printed expiration date.

<table>
<thead>
<tr>
<th>MAKE OF VEHICLE</th>
<th>MODEL OF VEHICLE</th>
<th>YEAR</th>
<th>COLOR</th>
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<tbody>
<tr>
<td>STATE</td>
<td>LICENSE PLATE #</td>
<td>EMAIL ADDRESS</td>
<td></td>
</tr>
<tr>
<td>PRINT NAME</td>
<td>APPLICANT’S SIGNATURE</td>
<td>DATE</td>
<td></td>
</tr>
</tbody>
</table>

FOR OFFICE USE ONLY

Payment Method
- [ ] Cash
- [ ] Check
- [ ] American Express
- [ ] Diamond Dollars
- [ ] Discover
- [ ] MasterCard
- [ ] Visa
- [ ] Journal Entry
- [ ] Transfer
- [ ] Payroll Deduction

Parking Area
- [ ] Lot #1
- [ ] Lot #2
- [ ] Lot #3

TU ID NUMBER

PERMIT #: _______________

GATE CARD #: ___________

AMOUNT: $___________

CASHIER INITIALS: _______________

DATE: _______________

Checked In T2 Flex Initials: __________ Date: __________