Temple University
Parking Services

PERMIT:

BILLING PERIOD / SEMESTER:

# **EMPLOYEE** Parking Agreement & Receipt Form

As a Monthly Parker, I hereby agree to abide by the following rules and regulations:

1) My parking privilege is solely for my convenience and at my own risk. Temple University assumes no responsibility for theft, fire, damage to or loss of use of either my vehicle or its accessories or its contents. The University has the right to close parking facilities due to inclement weather. Parking access will be provided during these periods at an alternative location. If it is determined, that a parker is parking more than one vehicle at a time within the assigned area, the user will have parking revoked and disciplinary measures may also be taken.
2) My permit must be displayed inside my vehicle, on the back of the rearview mirror. Vehicles found not displaying their appropriate university parking permit as well as the use of their Temple ID card upon entrance will result in the assessment of the $20.00 daily or hourly rate. If I utilize multiple vehicles, the permit must be transferred to the vehicle being driven. Only one vehicle may utilize your parking privileges at any given time. Vehicles found without the appropriate receipt of payment or registered permits are subject to the enforcement procedures.
3) My parking privilege may be cancelled at any time. The University has the right to change the parking rates. The University also has the right to withdraw my privilege at any time with the appropriate refund to me.
4) If I want my parking payroll deductions to be stopped, either temporarily or permanently, I must make arrangements to do so at the Office of Parking Services. I recognize that all faculty & staff suspending their deductions must return their permit to the Office of Parking Services. If I paid cash, check or credit card, a pro-rated refund will be processed and payroll deductions cancelled effective on the date of receipt of permit and signed payroll deduction form.
5) The temporary suspension of my payroll deduction forfeits my position in my assigned parking area. At the time I wish to restart my payroll deductions, I understand that I may be reassigned to a different parking area.
6) My failure to pay the parking fee by the start of the parking period will result in automatic cancellation of my parking privilege.
7) The cost of parking is $125.00/month, payable every 4 months. Parking periods are September-December, January-April, and May-August. Employees may opt for convenient payroll deduction.

_____ **MAKE OF VEHICLE** _____ **MODEL OF VEHICLE** _____ **YEAR** _____ **COLOR**

_____ **STATE** _____ **LICENSE PLATE #** _____ **EMAIL ADDRESS**

**PRINT NAME** **SIGN** **DATE**

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FOR OFFICE USE

TUID #: ____ ____ ____ - ____ ____ - ____ ____ ____ ____ ISSUE LEVEL: _____ AMOUNT $_____

PARKING FACILITY

- ❑ Carlisle West Garage
- ❑ _____

PAYMENT METHOD

- ❑ American Express
- ❑ Cash
- ❑ Check
- ❑ Department Transfer
- ❑ Discover
- ❑ MasterCard
- ❑ Journal Entry
- ❑ Visa

Cashiers Initials: _____ Date: _____ ❑ Verified T2 Flex Initials: _____ Date: _____