



**Parking Operations**

412 E. Spokane Falls Blvd.  
Spokane, WA 99202  
Phone: (509) 368-6999 Fax: (509) 368-6990  
E-mail: [spokane.parking@wsu.edu](mailto:spokane.parking@wsu.edu)  
Website: [spokane.wsu.edu/parking](http://spokane.wsu.edu/parking)

**Parking Permit Payroll Deduction Authorization**

**Eligibility**

Payroll deduction for your parking permit is allowed for members of the WSU Faculty, Classified Staff, Administrative & Professional Staff, and Graduate Students on an appointment of 0.50 FTE or greater. Temporary employees are not eligible. Please complete the form below and review the following important information.

**Pre-Tax Election Deduction**

The Pre-Tax Parking Fee Deduction Program is available as an option. The option allows you to payroll deduct your parking fees on a pre-tax basis. You must elect whether or not to deduct your parking fee from your pre-tax income. When you elect to payroll deduct on a pre-tax basis, it reduces your taxable income. This allows you to realize savings in Federal Income taxes, Social Security, and Medicare.

**Instructions**

ONLY ONE PARKING PAYROLL DEDUCTION PAYMENT PLAN ALLOWED PER ACADEMIC YEAR.

If you are eligible to participate, complete the payroll deduction form below when you purchase your parking permit. Make sure you check the appropriate area in the ① "Pre-Tax election" section, ② indicate your Permit type and term, ③ check your Appointment type and ④ indicate the number of payroll deductions. Please complete the ⑤ Personal information and ⑥ sign the form.

**Payment Plan Deduction Options**

Following submission of the payroll deduction authorization form, payments will automatically be deducted from your paycheck each pay period (the 10th and 25th of each month.) In most cases, the first payroll deduction will occur on September 10th. **There are only four deduction options (depending on the permit purchase price, and purchase date): 2, 6, 12 or 18 equal payments. You may choose fewer payments; provided an available deduction option is selected.**

- 18 equal payments (9 months) for permits \$301+
- 12 equal payments (6 months) for permits \$101 to \$300
- 6 equal payments (3 months) for permits \$61 to \$100
- 2 equal payments (1 month) for permits \$60 or less

**Refunds**

**Important note for Pre-Tax electors.** Tax laws do not allow for a refund of the Pre-Tax Parking Fee once deducted. Therefore, deductions are September through August or until academic or cyclic appointment ends each year

If you wish to stop parking permit fee deductions, you must return the permit to the Parking office for cancellation of this authorization; then the deduction will be stopped on the next available pay cycle.

Please complete all six (① ② ③ ④ ⑤ ⑥) sections below including your signature:

<p><b>① Pre-Tax Election: (Check one)</b> Please read the Pre-Tax Election Deduction information above.</p> <p><input type="checkbox"/> Yes, I elect to have my parking permit fee deducted on a pre-tax basis. I understand I cannot get a refund, once the fee has been deducted.</p> <p><input type="checkbox"/> No, I do not want my parking permit fee deducted on a pre-tax basis.</p>	<p><b>② Indicate Permit Type and Term: Annual, Semester, or Quarter (Check all that apply)</b></p> <table style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="text-align: left; border-bottom: 1px solid black;">Type</th> <th style="text-align: left; border-bottom: 1px solid black;">Term</th> </tr> </thead> <tbody> <tr> <td><input type="checkbox"/> ORANGE</td> <td>_____</td> </tr> <tr> <td><input type="checkbox"/> GREEN</td> <td>_____</td> </tr> <tr> <td><input type="checkbox"/> CTR CREDIT</td> <td>_____</td> </tr> <tr> <td><input type="checkbox"/> OTHER</td> <td>_____</td> </tr> <tr> <td><input type="checkbox"/> ACCESSABILITY*</td> <td>_____</td> </tr> </tbody> </table> <p><small>*Must provide copy of State Disabilities Parking Privilege ID card with this form</small></p>	Type	Term	<input type="checkbox"/> ORANGE	_____	<input type="checkbox"/> GREEN	_____	<input type="checkbox"/> CTR CREDIT	_____	<input type="checkbox"/> OTHER	_____	<input type="checkbox"/> ACCESSABILITY*	_____	<p><b>③ Appointment Type: (Check one)</b></p> <p><input type="checkbox"/> 12 Month Appointment</p> <p><input type="checkbox"/> 9 Month Appointment</p> <p><input type="checkbox"/> Other: My appointment is from _____ to _____</p> <hr/> <p><b>④ Payment Plan Deduction Options: (Check one)</b> Please read Deduction Options information above.</p> <p>Payment options depend on purchase price <u>AND</u> purchase date</p> <table style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="text-align: left; border-bottom: 1px solid black;">Number of Payments</th> <th style="text-align: left; border-bottom: 1px solid black;">Permit Price</th> <th style="text-align: left; border-bottom: 1px solid black;">Cutoff Date</th> </tr> </thead> <tbody> <tr> <td><input type="checkbox"/> 18 payments</td> <td>\$301+</td> <td>Sep 15</td> </tr> <tr> <td><input type="checkbox"/> 12 payments</td> <td>\$101 to 300</td> <td>Nov 15</td> </tr> <tr> <td><input type="checkbox"/> 6 payments</td> <td>\$61 to \$100</td> <td>Feb 15</td> </tr> <tr> <td><input type="checkbox"/> 2 payments</td> <td>\$60 or less</td> <td>Apr 30</td> </tr> </tbody> </table>	Number of Payments	Permit Price	Cutoff Date	<input type="checkbox"/> 18 payments	\$301+	Sep 15	<input type="checkbox"/> 12 payments	\$101 to 300	Nov 15	<input type="checkbox"/> 6 payments	\$61 to \$100	Feb 15	<input type="checkbox"/> 2 payments	\$60 or less	Apr 30
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**⑤ Personal information: Please print**

Name: \_\_\_\_\_ Department: \_\_\_\_\_  
 WSU ID Number: 0 \_\_\_\_\_ Daytime Phone: \_\_\_\_\_

**Important:** I understand that payroll deductions must be completed by the end of the deduction period. If for any reason, during the deduction period, I do not earn pay, or I sever university employment, **I must return the permit** and/or make other arrangements for payment. I will check my earning statements to make sure deductions are occurring. Questions call Parking Services 509-368-6999

**I HEREBY AUTHORIZE PAYROLL SERVICES TO DEDUCT FROM MY SALARY THE AMOUNT INDICATED**

**⑥ Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**FOR OFFICE USE ONLY**

Permit #:	Amount:	Date:	Initials:
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