

# St. Cloud State University

## University Employee Parking Permit Payroll Deduction Authorization Form

Name: \_\_\_\_\_ Campus Phone \_\_\_\_\_

Employee SCSU ID: \_\_\_\_\_

(This is your SCSU ID number, **not** your payroll ID number)

Lot: \_\_\_\_\_ Permit number: \_\_\_\_\_

**Please check the correct amount:**

\_\_\_\_ **\$295.00** for gated lots (B, F lot/lane, H, L, & P)

\_\_\_\_ **\$305.00** for gated lots (DUPLICATE)

\_\_\_\_ **\$270.00** for non-gated lots

\_\_\_\_ **\$280.00** for non-gated lots (DUPLICATE)

\_\_\_\_ **\$165.00** for K lot

\_\_\_\_ **\$175.00** for K lot (DUPLICATE)

I authorize payroll deduction of **\$45.00 per pay period** beginning with the pay period ending **September 29, 2009** and continuing until the total amount due for the issued parking permit is paid in full.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date