



UCard, Access and Parking Services

South Dining Hall
883 Broadway Street
Lowell, Massachusetts 01854

Tel: (978) 934-2800
Fax: (978) 934-4004
E-mail: UCAPS@uml.edu
Web: <http://www.uml.edu/UCAPS>

UNIVERSITY OF MASSACHUSETTS LOWELL PAYROLL PRE-TAX DEDUCTION FORM SEPTEMBER 1, 2011 – AUGUST 31, 2012

I hereby authorize the University of Massachusetts Lowell to reduce my yearly compensation by an amount equal to the annual parking fee of (check one):

- _____ **Benefitted Faculty/Staff and Chairpersons**
\$148.32 per year (\$6.18 per pay period)
- _____ **Wannalancit Preferred Parking (Tremont/Hall St. Garage)**
\$300 per year (\$12.50 per pay period)
- _____ **Wannalancit Designated Parking (East Courtyard)**
\$600 per year (\$25.00 per pay period)
- _____ **Cabinet Members and Cumnock Designated Parking**
\$750 per year (\$31.25 per pay period)

I understand that this election may not be revoked after the beginning of the period for which the parking benefit will be provided and that compensation reduction amounts are not refundable.

I understand that this election will automatically be renewed for subsequent years. All personnel are required to obtain a new permit by September 1 each year online at <https://MyParking.uml.edu> or by visiting the UCard, Access and Parking Services Office.

Full Name: _____

Employee ID: _____
(found on paycheck not ID card, not the same as ISIS number)

Signature: _____

Date: _____

Please return completed form to UCard, Access and Parking Services at University Crossing, or fax to 978-934-4004