ALAMO COLLEGES DISTRICT

Employee Parking Permit Application &
Payroll Deduction Authorization Form

It is required for all employees who plan to park at Alamo Colleges District parking lots or garages to purchase a parking permit. Please enter your Personal, Vehicle, Parking Election and Payment Information below.

Parking Decal _____ * No Parking Decal _____

*Do not sign me up for automatic payroll deduction at this time. By choosing this option, I understand I am not eligible to park on any Alamo Colleges District property. Please complete all information excluding decal type, vehicle information and permit request and skip to signature line below.

 PLEASE PRINT CLEARLY

Name:_____ Date of Birth:_____

Driver's License # and State: _____ Banner #:_____

Address: _____ _____ _____ _____
            Street   City   State   Zip Code

Email Address:_____ Campus: _____

Work Telephone Extension No.:_____ Cellular Phone No.:_____

Decal Type (Circle One)   **Motorcycle** – **Faculty/Staff** – **Administrator**

Vehicle Information: ***2 vehicles may be registered under one deduction. Additional vehicles will require an additional deduction***

Vehicle 1	**Vehicle 2**
Make:_____	Make:_____
Model/Year:_____	Model/Year:_____
License Plate No. _____	License Plate No. _____
VIN#:_____	VIN#:_____
Body Style: _____	Body Style: _____
Registration State: _____	Registration State: _____

Please select the type of permit being requested:

☐ Option 1: Employee ($2.09/Semi-monthly)   ☐ Option 2: Handicap (Free)*

*If selecting Option 2, you must present either a disabled parking placard or vehicle registration that shows disability status. Please submit completed form to dst-hrcenter@alamo.edu.

I authorize Alamo Colleges District to deduct the pre-tax parking rate from my semi-monthly payroll. I understand that the deduction will be on a pre- tax basis and will remain in effect indefinitely unless I affirmatively de-select at a later date. I also acknowledge that, as a registered owner of the parking permit, I am responsible for all traffic citations issued against this permit. The parking decals will be issued to you by the Alamo Colleges Police Department. Please have all vehicle information, including a valid driver's license, upon receiving a permit. Should you have any questions, please contact your HR Representative.

I assert that all of the above information is true and correct.

_____   _____
Employee Signature   Date