

PURDUE UNIVERSITY CALUMET  
FACULTY/STAFF

PARKING ACCESS PERMIT APPLICATION  
2009-2010

NAME: \_\_\_\_\_ PUID : \_\_\_\_\_

STAFF CLASSIFICATION: \_\_\_\_\_ DEPT: \_\_\_\_\_

HOME ADDRESS: \_\_\_\_\_

CAMPUS ADDRESS: \_\_\_\_\_

	PAYMENT SCHEDULE	EMPLOYMENT % OF FULL – TIME	PARKING FEE
Parking Fee Effective 8/26/09	Monthly Pay Reduction	__ More than Half-Time __ Half-Time or Less	\$11.30 – 10 Pays (\$113.00/YR) \$5.65 – 10 Pays (\$56.50/YR)
	Biweekly Pay Reduction	__ More than Half-Time __ Half-Time or Less	*\$5.65 – 20 Pays (\$113.00/YR) *\$2.82 – 20 Pays (\$56.50/YR)

**\*20 pay periods – (begins 8/26/09 – ends 5/31/10)**

Payroll Salary Reduction Agreement/Authorization:

I hereby authorize Purdue University Calumet to reduce my salary by the above period rate associated with my job classification to purchase qualified (non-taxable) parking benefits. **I understand this reduction will continue in effect at the above fee until new parking fees are established.** I understand that if new parking fees are approved, I will be required to complete a new Parking Access Permit Application immediately following such rate increase. I further understand that I may terminate this agreement upon filling out the **“Request to Cancel”** form at the University Police Department. **I also understand that I am not required to participate in this plan if I choose not to park on campus property.**

Persons with parking privileges are licensees who are entitled to use appropriate parking spaces. I understand that my signature constitutes an agreement between myself and the University and that the University shall not be responsible for any loss or damage to the vehicle or its contents resulting from theft, vandalism, fire, collision or any other cause on the University’s property.

Applicant’s Signature \_\_\_\_\_ Date \_\_\_\_\_