UNIVERSITY OF TEXAS AT EL PASO
PAYROLL DEDUCTION FORM FOR PARKING PERMITS

I HEREBY AUTHORIZE YOU TO TAKE THE ACTION OR ACTIONS INDICATED BELOW IN REGARDS TO THE PAYMENT DEDUCTIONS FOR A UTEP PARKING PERMIT: (Please select the appropriate button and furnish additional information as required.)

Please select the number of Deductions:

☐ MONTHLY

☐ ONE TIME

Please choose the appropriate tax option:

☐ Payroll deduction on a pre-tax basis per pay period. (Payroll deductions will take place before taxes are paid.)

☐ Payroll deduction on a post-tax basis per pay period. (Payroll deductions will take place after taxes have been deducted.)

It is also my understanding that in the event of an adverse ruling by the Internal Revenue Service concerning the Federal income tax liability of individuals who participate under this plan, it will be my responsibility to satisfy any Federal income tax deficiency.

Receipt of your request for the University of Texas at El Paso to begin payroll deduction on your behalf is acknowledged beginning with the __________-__________ fiscal year.

_______________________     ______________________     ______________________
Permit Number                                  Permit Amount                                  UTEP ID Number

_______________________     ______________________
Authorized by:                               UT EID

_______________________     _______________________
PTS Representative                                  Date of Request