CITY OF MINNEAPOLIS APPOINTED PARKING
$139.00 PAID BY THE CITY
ENROLLMENT FOR TAX- FREE CONTRIBUTIONS IN EXCESS OF CITY PORTION

Employee Name (please print): _____

Employee Payroll ID Number: _____

Department Name: _____

I currently have a contract with the _____Ramp for monthly parking at the rate of $ _____per month. The City pays $139.00 per month and any required payment in excess of this amount is my responsibility. Under the Transportation Act of 2000, I wish to participate in the City's parking program that allows payroll deduction of my portion on a pre-tax basis. The monthly IRS limit of $230.00 per month applies to the City's contribution of $139.00 per month and my pre-tax portion. Any amounts above the $230.00 per month limit will be deducted from my pay on an after-tax basis.

My parking ramp access card number: _____
(Card number is required to allow the Ramp to apply the monthly payment appropriately)

By my signature below, I authorize the City to deduct the monthly parking fee from my paycheck. City Benefit staff will calculate the pre-tax portion and any remaining amount that may have to be deducted on an after-tax basis to meet IRS limitations for untaxed parking fees.

By my signature below I also verify that I understand and accept the terms and conditions described below:

1. The payroll deduction from the second paycheck of each month, along with the City's portion for appointed employees, will prepay the parking fee for the following month and will be mailed directly to the ramp I have designated above.

2. In the event the second paycheck of the month is not sufficient to allow the appropriate deduction(s) to pay the full monthly parking fee for the following month, the tax-free deduction will be cancelled and direct payment to the Ramp Office will be required by me to retain parking access. A new enrollment form must be submitted to the Human Resources Benefits Office on a timely basis to resume tax-free deductions.

3. A cancellation form must be received in the Human Resources Benefits Office 30 days prior to any proposed cancellation date (due to resignation/termination of employment or changing to another mode of transportation such as the bus). Since funds are automatically mailed to the ramps each month, any refund of erroneous payments must be obtained directly from the ramp by the participant.

4. Monthly contract parking rates are subject to change and will be posted at the Ramps. Any required increase in deductions will be considered authorized by virtue of my current participation in the program if a cancellation form is not submitted on a timely basis.

_____	_____	_____
Employee Signature	Date	Work Telephone Number

Please contact Benefits at 612-673-3761 if you have any questions.

You may fax (612-673-2533) or mail the completed form to:

City of Minneapolis
Human Resources - Benefits
Room 100 Public Service Center
250 South 4th Street
Minneapolis MN 55415-1339

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