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Employee Parking Permit Application & Payroll Deduction Authorization Form

It is required for all employees who plan to park at Alamo Colleges parking lots or garages any time during a fiscal year to purchase a parking permit. Please enter your Vehicle Information below."

___ 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 College property. Please r t k p v p c o g " d c p p g t " F " c p f " s k i p to signature line.

Name: _____ DOB: _____ Banner ID: _____

Address: _____
Street City State Zip Code

Email Address: _____ Campus: _____

Telephone Extension No.: _____ Driver's License Number: _____ State: _____

Vehicle Information:

Vehicle 1

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

Vehicle 2

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

Sharing of permits with another person is prohibited.

I authorize Alamo Colleges 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. When form is completed please print and take it to your on Campus PD Office to be issued a parking decal.

I assert that all of the above information is true.

Employee Signature

Date