

**Old Dominion University
Salary Reduction Agreement
For Pre-Tax Parking Decal/Fee Program
Code 132(f)(4) Accounts**

INSTRUCTIONS:

- + To participate in the Pre-Tax Parking Decal/Fee Program effective October 1, 2009, **check the "YES" box indicated below.**
- + You must be teaching/research faculty on 24 pays, AP faculty on 24 pays or classified staff on 24 pays to be eligible.
- + In addition to completing this form - you must sign up for a parking decal through the approved ODU Parking Services parking decal enrollment process (groups and rates adjusted annually) .
- + Print your Name and University Identification Number and Sign and Date this form AND
- + Return this completed form to ODU Parking Services, by September 22, 2009. Failure to meet this deadline will disqualify you from participation in the Pre-Tax Parking Decal/Fee Program and you will be placed in the post-tax payroll parking deduction automatically.

Check Here:

_____ Yes, I wish to begin participation in the Pre-Tax Parking Fee Program beginning October 1, 2009.

The purpose of this salary reduction agreement is to set aside money for parking fees. I understand that as of the paycheck dated October 16, 2009 Old Dominion University will reduce my salary each semi-monthly pay period by the fee charged for University parking (see current period Parking Services parking decal enrollment information). Old Dominion University will forward the amount of this reduction to the Office of Parking Services on a semi-monthly basis.

This agreement is legally binding and may not be terminated until I complete another Salary Reduction Agreement, a new decal period has begun and I do not sign up for a parking decal, or I am no longer employed by Old Dominion University. I may enter into an unlimited number of agreements each year.

By: _____ Date: _____
Employee Signature

Employee Name (Please Print) University Identification Number

Parking Services Use Only:

Salary Reduction Agreement Rec'd by: _____ Date Rec'd: _____

Terminate Agreement:

Refund Amount (if any) : _____ Approved by: _____ Date: _____

Payroll Office Use Only:

Processed by: _____ Date: _____

Audited by: _____ Date: _____