



**Parking Services**  
**PO Box 2000**  
**606 Belknap St**  
**Superior, WI 54880**

**Payroll Deduction for 2019-20 UW-Superior Reserved Parking Permit**

**NAME(Print)** \_\_\_\_\_

**Last**

**First**

**MI**

I hereby authorize the University of Wisconsin-Superior to deduct the amount of my 2019-20 reserved parking permit to the installment schedule listed below for a total parking fee of \$209.25 Semester only permit fee.

FASL/Academic Year Appointment-9 Installments  
FASL/Annual Appointments-12 Installments  
University Staff and Eligible UST Staff-26 Installments

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**Signature**

**Date**

1. You are entitled to an exact copy of any agreement you sign.
2. Once you sign up for the payroll deduction you must adhere to your installment schedule.
3. Persons, who separate from employment with the university before their payroll deductions cover the total cost of their parking permit fee, **must** return their permit into the Parking Office prior to or on their last day.

**Send this form along with the Parking Permit Request Form to parking Services. Thank you.**

Trish Hegstrom-Olson, Operations Program Associate  
University Public Safety Building  
PO Box 2000, 606 Belknap Street  
Superior, WI 54880  
715-394-8177