

**PAYROLL DEDUCTION RENEWAL FORM**

**New Mexico State University  
Parking Department**

Permit # \_\_\_\_\_

**Instructions**

1. Please complete the following form. All fields required
2. Print form
3. Signature required
4. Submit the Payroll Deduction Renewal Form:
  - a. **Campus Mail: Parking Department MSC 3PAR**
  - b. **As a PDF attachment to e-mail address: [parking@nmsu.edu](mailto:parking@nmsu.edu)**
  - c. **Fax to 646-7814**

**EMPLOYEE INFORMATION**

Banner ID # \_\_\_\_\_ Employee Name \_\_\_\_\_  
Address \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_  
e-mail address \_\_\_\_\_ Telephone \_\_\_\_\_

**PERMIT INFORMATION**

Faculty/Staff Moveable (\$86.00) \_\_\_\_\_ Outer Lot Employee Moveable (\$46.00) \_\_\_\_\_  
Faculty/Staff Permanent (\$86.00) \_\_\_\_\_ Outer Lot Employee Permanent (\$46.00) \_\_\_\_\_  
Motorcycle (\$20.00) \_\_\_\_\_ (Need Copy of Registration)

**ADDITIONAL PERMITS (\$225.00)**

Faculty/Staff Moveable \_\_\_\_\_ Outer Lot Employee Moveable \_\_\_\_\_  
Faculty/Staff Permanent \_\_\_\_\_ Outer Lot Employee Permanent \_\_\_\_\_

**SELECT ONE:** Mail Permit \_\_\_\_\_ Pick up Permit at Parking Department \_\_\_\_\_

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

**Contact the Parking Department at 646-1839 with questions**

FOR OFFICIAL USE ONLY

Customer UID Number: \_\_\_\_\_ Receipt # \_\_\_\_\_

Date Request Completed: \_\_\_\_\_ Request Completed by: \_\_\_\_\_