

**The George Washington University  
Pre-tax Transit and Metro Parking Benefit Plan  
Enrollment/Change Form**

Today's Date: \_\_\_\_\_

GW Id # \_\_\_\_\_

Last Name: \_\_\_\_\_

First Name: \_\_\_\_\_

Telephone: \_\_\_\_\_

Email Address: \_\_\_\_\_

**SmarTrip Transit Benefits**

**New/Renew Participation** Deduction Start/Change Date (Enter Pay-Date) \_\_\_\_\_

I hereby authorize the George Washington University to deduct \$ \_\_\_\_\_ (total per month) from my paycheck for **SmarTrip Benefits**. *\*note: Payroll deductions can be made in \$10 increments starting at a minimum of \$40 to a maximum of \$255 per month.*

I wish to receive my Transit benefit as a credit to my registered **SmarTrip card**

# 0 \_\_\_\_\_

**SmarTrip Parking Benefits**

**New/Renew Participation** Deduction Start/Change Date (Enter Pay-Date) \_\_\_\_\_

I hereby authorize the George Washington University to deduct \$ \_\_\_\_\_ (total per month) from my paycheck for **Metro Parking Benefit**. *\*note: Payroll deductions can be made in \$10 increments starting at a minimum of \$40 to a maximum of \$110 per month*

I wish to receive my Parking benefit as a credit to my registered **SmarTrip card**

# 0 \_\_\_\_\_

**Suspend/Terminate Transit Only** – Deduction End Date (Enter Pay-Date) \_\_\_\_\_

**Suspend/Terminate Parking Only** – Deduction End Date (Enter Pay-Date) \_\_\_\_\_

I understand that by signing and submitting this form, I authorize a deduction from my annual salary based on my elections above. I further understand my election is irrevocable for one month and that deductions will continue, as authorized above, until I submit a new form to either change or stop participation in the plan. I further attest that the deductions are for work related commuting expenses and are not reimbursable by the university. *I also understand that any Smartrip benefits value classified as Transit or Parking is non-interchangeable.*

**Signed** \_\_\_\_\_ **Date** \_\_\_\_\_

Return completed form to: Payroll Services, 45155 Research Place, Suite 155, Ashburn, VA 20147 or  
*Fax to 571-553-4406 or Email to payroll@gwu.edu*

(Payroll Use Only)

<b>Deduction Effective Date</b>	
<b>Plan Effective Date</b>	
<b>Pay Period Amount</b>	
<b>Pay Period</b>	

## Pre-Tax Transit and Parking Benefit Statement of Agreement

By signing and submitting the Pre-tax Transit Benefit Plan Enrollment/Change Form, I \_\_\_\_\_, acknowledge and will adhere to the following terms of the pre-tax transit benefit.

- I authorize a deduction from my annual salary based on my elections.
- I understand my election is irrevocable for one month and that deductions will continue, as authorized above, until I submit a new form to either change or stop participation in the plan.
- I understand that the deductions are for work related commuting and or parking expenses and *are not reimbursable* by the university.
- I understand that SmarTrip Parking benefits are only valid for Parking in Washington Area Metropolitan Transit Authority parking lots that accept SmarTrip as a payment method. Deductions for Parking are non-transferrable or reimbursable.
- I understand that I must register my SmarTrip card with WMATA in order to participate in SmartBenefits.
- I understand that when I make a change to either my Transit or Parking benefit I must reformat my SmarTrip card between the 16<sup>th</sup> and the end of the month prior to the new benefit amount being made available.

Signature \_\_\_\_\_ Date \_\_\_\_\_

GWID # \_\_\_\_\_