Today’s Date: ______________________    GW Id # ______________________

Last Name: ________________________  First Name: ________________________

Telephone: ________________________  Email Address: ________________________

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**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 $260 per month.

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

Register your card on WMATA: https://smartrip.wmata.com/Account/Create

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**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 $120 per month.

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

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☐ **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)

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<thead>
<tr>
<th>Deduction Effective Date</th>
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<tr>
<td>Plan Effective Date</td>
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<td>Pay Period Amount</td>
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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 16th and the end of the month prior to the new benefit amount being made available.

Signature _________________________ Date _______________________

GWID #_____________________________

Reassignment: (Transferring funds from old card to the new)

If your SmarTrip card is lost, damaged or stolen, you must notify WMATA by calling the SmarTrip Hotline at 1-888-762-7874.

To complete the transfer of pre-tax benefits, you must purchase a replacement card from WMATA or the FSSC and register it with WMATA. You should then email payroll@gwu.edu with your GWID, old card number, new card number and the reason for your transfer request. Failure to contact Payroll Services could delay any future monthly benefits.