

# HENNEPIN COUNTY

## MINNESOTA

### Parking and Vanpooling Enrollment or Change Form

**DIRECTIONS:** Fill out this form and click "Submit". The form will auto-generate an email for you to send to [HR.Benefits@hennepin.us](mailto:HR.Benefits@hennepin.us).

**Note:** This form is for non-county parking lots, parking meters, and/or vanpooling expenses. Parking expenses paid or reimbursed by the county are not eligible for this program.

**Employee Name:**

**Employee ID #:**

**Department:**

**Preferred Phone #:**

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#### Enrollment – Parking and vanpooling reimbursement program

I authorize that the deduction amount noted below be taken on a pre-tax basis from the first two pay checks of each month, **starting next month**.

**\$**                      **deducted per paycheck (max \$132.50)**

I understand that:

- The effective date is the beginning of the month following receipt of form.
- **Funds must be reimbursed within 180 days** the expense is incurred or paid.
- The maximum pre-tax deduction in 2020 is \$265 per month or \$132.50 deducted from first two paychecks each month.
- Funds remain in this account upon termination of employment if claims have not been incurred prior

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#### Change – Change parking and vanpooling reimbursement program

I authorize that my deduction be **stopped**.

I authorize that my deduction be **changed to \$**                      **per paycheck (max \$132.50)**

I understand that:

- The effective date is the next paycheck following receipt of form.
- **Funds must be reimbursed within 180 days** the expense is incurred or paid.
- The maximum pre-tax deduction in 2020 is \$265 per month or \$132.50 deducted from first two paychecks each month.
- Funds remain in this account upon termination of employment if claims have not been incurred prior to termination.

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**Employee Signature:**

**Date:**

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