

**NC STATE**

An Equal Opportunity/Affirmative Action Employer

**Transportation**  
Campus Box 7221  
Raleigh, North Carolina 27695-7221  
919.515.3424 (tel)  
919.515.7650 (fax)  
[www.ncsu.edu/transportation](http://www.ncsu.edu/transportation)

**Payroll Deduction**  
**Permit Return Form**

9 Digit Campus ID #: \_\_\_\_\_

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

Affix Permit in Space Provided:



By signing this document I affirm that I wish to cancel the payroll deduction of my parking permit.

Signed: \_\_\_\_\_ Date: \_\_\_\_\_

Cancellation is effective the date this completed form is received in Transportation's office.

Please mail to: Carolyn Manuel  
Transportation Department  
Administrative Services Building I  
Campus Box 7221  
2721 Sullivan Drive  
Raleigh, NC 27695-7221