

University of Manitoba – Staff Parking Cancellation Policy

In order for the cancellation to be effective for the upcoming month:

Fort Garry Campus : Return signed Cancellation Form (located below) to Parking Services (Welcome Centre, 423 University Crescent) prior to the last day of the current month.

Bannatyne Campus : Return signed Cancellation Form (located below) to the Bannatyne Security Services office (S105 Medical Services) by the last Tuesday of the month. You may continue to park until the cancellation is in effect. You may also return the signed Cancellation Form to the Fort Garry Welcome Centre by the month's end.

*** Staff who are still required to display a physical hangtag must return the signed Cancellation Form along with their hangtag prior to last day of the current month.

Terms & Conditions

Review the Terms and Conditions on the application form below. SIGNING THE FORM

INDICATES UNDERSTANDING AND ACCEPTANCE OF ALL OF THE TERMS AND
CONDITIONS.

Approved U of M Leave Option

Complete the leave option section of the cancellation form below. View our FAQ's for more information relating to the leave option.

Parking Services
Staff Permit Cancellation

Completed forms must be returned to the Welcome Centre, 423 University Crescent by the last business day of the current month, in order to be effective for the following month. See full Terms and Conditions below.

Customer Information (all fields required)

Name: _____
 Mailing address: _____
 City: _____ Postal code: _____
 Employee I.D #: _____

Permit Information

Virtual Permit/ Permit #: _____
 Location: _____
 Cancellation date: _____
 Reason for cancelling: _____

Permit Cancellation Terms & Conditions

I authorize Parking Services to cancel the Staff Parking Permit and understand that in order for cancellation to take effect for the upcoming month, I must surrender the staff permit (if applicable) and submit it to Parking Services along with this form by the last business day of the current month. No refunds will be processed for cancellations submitted mid-month.

I understand that Parking Services will cancel the permit agreement within 30 days if the permit cancellation form is not accompanied by the hang-tag (if applicable). I understand Parking Services will automatically cancel my waitlist request(s) unless I request to remain active on the waitlist. I understand if the permit is being returned under the Parking Leave Option on this form, I may not receive immediate direct entry in my preferred lot upon my return.

Notice Regarding Collection, Use, and Disclosure of Personal Information by the University

Your personal information is being collected under the authority of *The University of Manitoba Act*. The information you provide will be used by the University for the purpose of cancelling the parking permit including any existing Pre-Authorized Debit Agreements and waitlist requests, as well as issuing a refund (if applicable). Your personal information will not be used or disclosed for other purposes, unless permitted by *The Freedom of Information and Protection of Privacy Act (FIPPA)*. If you have any questions about the collection of your personal information, contact the Access & Privacy Office (tel. 204-474-9462), 233 Elizabeth Dafoe Library, University of Manitoba, Winnipeg, MB, R3T 2N2.

Parking Permit Leave Option

Only complete this section if you are requesting to defer your parking due to an approved U of M leave. Vacation does not qualify as an approved leave.

Temporary Cancellation and Preferential Waitlist Application

A signed Cancellation Form is returned to Parking Services. No further payments are required, until the staff member is back to work and assigned a new permit. This is a cancellation and is in effect until Parking Services is notified of the customer's return, by the customer. Upon return to work, the staff member is eligible to have their name placed near the top of the waitlist for their original lot. If the lot is full, Parking Services may place the staff member into a different lot until their preferred lot is available.

I confirm this is an approved leave: _____ INITIAL Return to work date: _____ MM/DD/YYYY

SIGNATURE INDICATES UNDERSTANDING AND ACCEPTANCE OF ALL OF THE ABOVE TERMS AND CONDITIONS

Permit Holder Signature: _____ Date: _____

Office Use Only

VIRTUAL PERMIT/ PERMIT #: _____	DATE PERMIT RETURNED: _____
RECEIVED BY: _____ & _____	ADD or REMOVE W/L: _____
PAYMENT METHOD: DW or P/O	ORIG W/L REQUEST DATE: _____
AUTHORIZATION FOR REFUND NO.: _____	REFUND AMT: (if applicable): _____
TAXABLE BENEFIT: Y or N RECORDED: Y or N	CANCELLATION COMPLETED BY: _____