

# TAXSAVER COMMUTER TICKET

# APPLICATION FORM

NAME: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

DEPARTMENT: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ EMPLOYEE ID NO. \_\_\_\_\_\_

DEPARTING FROM: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ DESTINATION\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

MONTHLY: YEARLY:

CONTINUOUS MONTHLY TICKET ORDER: YES NO

DATE FROM WHICH TICKET IS TO COMMENCE (state month): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

## AUTHORISATION

I authorise the deduction of the cost of the ticket listed above, from my salary on a monthly/yearly basis as appropriate.

I shall inform the HR department at least two weeks before the expiry date of my monthly ticket, if I wish to discontinue my participation in this scheme at any time.

In the event of the termination of my employment with the TU, I agree to return my ticket to the TU and/or reimburse the TU in respect of any outstanding amount. I accept that at the discretion of the Institute the balance outstanding may be deducted directly from my final salary payments.

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