

# UNIVERSITY OF MINNESOTA

Twin Cities Campus

**Parking and Transportation Services**

Office: 612-626-7275

Fax: 612-624-8899

E-mail: [parking@umn.edu](mailto:parking@umn.edu)

300 Transportation and Safety Bldg.

511 Washington Avenue S.E.

Minneapolis, MN 55455

[www.umn.edu/pts](http://www.umn.edu/pts)

## PARKING AND TRANSPORTATION SERVICES REFUND FORM

Individuals wishing to request a refund MUST fill out this form. Please include any original documentation (e.g., tickets and/or receipts)

- Submit by Mail:
- Submit by Fax: c/o Accounts Receivable
- Submit by Email: [parking@umn.edu](mailto:parking@umn.edu) with REFUND in the subject line

Fees paid by credit card will be refunded to that credit card. Fees paid by cash will be refunded either by check or by parking coupon.

### **Please Print:**

Today's Date: \_\_\_\_\_ Facility you parked in: \_\_\_\_\_ Date Parked: \_\_\_\_\_  
Name: \_\_\_\_\_ (Note: Refunds cannot be  
Home Address: \_\_\_\_\_ mailed to University  
City & State: \_\_\_\_\_ Zip: \_\_\_\_\_ addresses.)  
Phone Number: \_\_\_\_\_ Email Address: \_\_\_\_\_

### **Paid with Credit Card** (refund applied to card):

Type of Card (check one)

\_\_\_ Visa/MC \_\_\_ Disc \_\_\_ AmEx

Last 4 digits of credit card number:

If multiple cards were used Type of Card (check one):

\_\_\_ Visa/MC \_\_\_ Disc \_\_\_ AmEx

Last 4 digits of credit card number:

Reason for Request: \_\_\_\_\_  
\_\_\_\_\_

### **Paid with cash**

Choose method of refund

\_\_\_ Check (by mail, arriving in 4-6 weeks)

\_\_\_ Coupon (by mail, arriving in 1-2 weeks)

\*one free day of parking at U of M facilities,  
doesn't expire, up to \$12 value

### PTS OFFICE USE ONLY

Customer Services Representative: \_\_\_\_\_

Attach any receipts and/or tickets or envelopes and give to: Accounts Receivable

Parking Ent Time: \_\_\_\_\_

Total Time Parked: \_\_\_\_\_

Parking Exit Time: \_\_\_\_\_

Calculated Fee: \_\_\_\_\_

AMOUNT APPROVED: \$ \_\_\_\_\_

IF NOT APPROVED CHECK HERE: \_\_\_\_\_

Manager Notes: \_\_\_\_\_  
\_\_\_\_\_

Manager Signature: \_\_\_\_\_ Date: \_\_\_\_\_