



CANCELLATION REQUEST FORM



ONECARD & PARKING SERVICE CENTER (OCPS)

42 W. Warren, Suite 257, Detroit, MI 48202

OneCard Inquires (313) 577-CARD or Parking Inquiries (313) 576-PARK

To request refund: Print, sign, and return to Service Center or email from University email account to ONECARD@WAYNE.EDU

Name: _____

Date: _____

Mailing Address: _____

ID #: _____
(9 digits)

City, State, Zip: _____

Affiliation: (Check One)

Email: _____

Student: _____

Contact Number: _____

Faculty/Staff: _____

Other: _____

Cancellation Request Type: (Check One)

Close OneCard Account (leaving University)

I am leaving Wayne State University and would like to close my OneCard account and have the balance reimbursed to me. **I am returning my OneCard along with this form and understand there will be a \$10 fee to re-activate my account if I return to the University.** I do understand this reimbursement make take up to 4 to 6 weeks to process. Furthermore, I do understand that a refund will only be processed if my balance is over \$5 per the OneCard terms and conditions found at ONECARD.WAYNE.EDU.

Parking Permit Cancellation

Reason for cancellation: (Check One)

Hang Tag #: _____

No longer taking classes _____ FMLA _____ Relocation _____ Carpooling _____ Other _____

RFID hangtag does not need to be returned to office unless changing to retiree status.

If applicable, my refund will be mailed to the above address. Refunds can not be mailed to a WSU campus address.

Remarks/Comments (use back of form for additional space)

Requestor Signature: _____

FOR SERVICE CENTER USE ONLY: (attach supporting documents)

Processed by: _____

Last Deduction Date: ___/___/___

Received/Processed Date: ___/___/___

Deduction Amount: _____

Refund Method: SPA _____ P/R _____

Deduction Period Covers: _____

Total Refund/Balance: _____

Hang Tag Returned: Yes or No

Circle One: 12 Month / 9 Month

Circle One: Plan #1 Plan #2 Plan #3

Comments/Calculations:

WSU Representative: _____