



# Parking & Transit Claim Form

**Instructions:** To receive reimbursement under your employer's parking & transit plan, please complete all required fields and attach required supporting documentation. Claims must be submitted directly to SuperiorUSA via fax or mail.

**SECTION 1: EMPLOYEE INFORMATION** (Please Print)

Name (Last, First, MI)	Social Security Number	Date of Birth
Employer	Preferred Phone Number	Email Address

Change of Address: \_\_\_\_\_

**SECTION 2: QUALIFIED PARKING CLAIM REIMBURSEMENT** (Please Print)

A receipt or monthly billing statement relating to your parking expenses is required (if available)

Date(s) of Service	Receipt Available (Yes or No)	Parking Provider	Description of Parking Arrangement (meter, lot, etc.)	Amount Requested
	Yes No			
	Yes No			
	Yes No			
	Yes No			
	Yes No			
<b>Total amount requested from your Qualified Parking Reimbursement Account</b>				

**SECTION 3: MASS TRANSIT CLAIM REIMBURSEMENT** (Please Print)

A receipt or monthly billing statement relating to your mass transit expenses is required (if available)

Date(s) of Service	Receipt Available (Yes or No)	Mass Transit Provider	Description of Mass Transit Used (vanpool, bus, etc.)	Amount Requested
	Yes No			
	Yes No			
	Yes No			
<b>Total amount requested from your Mass Transit Reimbursement Account</b>				

**SECTION 4: EMPLOYEE SIGNATURE**

I, the undersigned, hereby request reimbursement from my accounts in my employer's Plan for the above listed expenses. I certify that the above information is true, accurate, and complete, and that I actually incurred these expenses in conjunction with commuting to or from my place of employment during a period when I was covered under this Plan. I have not nor will I seek reimbursement for the expenses listed above through another plan or another source. I understand that I alone am responsible for compliance with applicable tax regulations and documentation maintenance requirements, and that I agree to indemnify and hold harmless my employer and SuperiorUSA for any liability resulting from my reimbursements and participation in the Plan.

**Employee Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

Completed claim forms must be submitted along with required supporting documentation directly to SuperiorUSA for reimbursement. Claims may be faxed (218-725-9161 or 877-422-5192), emailed, or mailed. Please visit our website at [www.superiorusa.com](http://www.superiorusa.com), email, or call (877) or (218) 529-2477 with questions.

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### General Claim Reimbursement Procedures

- You must use a claim submission form in order to receive reimbursement from SuperiorUSA. Please read all form instructions, print legibly, complete all required fields, and attach all required supporting documentation in order to ensure the timely processing of your reimbursement.
- You must sign and date the claim form or your reimbursement cannot be processed.
- Please either mail or fax your claim to SuperiorUSA, but do not do both.
- Incomplete or erroneous claim submissions will be rejected or required to provide additional information.
- Reimbursements will be paid by paper check unless you have completed and submitted a Direct Deposit Authorization to your employer or SuperiorUSA (if direct deposit is permitted by the Plan).
- Please keep copies of all your claim form submissions including supporting documentation such as receipts and provider billing statements. SuperiorUSA does not need the originals in order to process your claim.
- The IRS generally considers the date of service for an expense to be the date service is rendered or received, not the date the expense is actually paid.
- Make sure your identifying information is listed on any additional pages of documentation you submit in case they become separated from the claim form itself.
- You must identify your employer where requested.
- Please calculate and total the amount you are requesting under each account (Parking and/or Mass Transit).
- Keep your address and other information up-to-date using the Change of Address box below Section 1 of this form.
- If there is a preferred phone number where you would like to be contacted with any questions or issues regarding this specific claim, please provide it in Section 1.
- Reimbursement for qualifying expenses can be requested through the end of any applicable run-out period.
- Please keep copies of all your claim form submissions including supporting documentation such as itemized receipts and provider billing statements. SuperiorUSA does not need the originals in order to process your claim.

### Parking & Mass Transit Claim Procedures

- Receipts and/or parking and mass transit provider billing statements must be submitted as supporting documentation if available. Common examples where receipts or billing statements are not available are for parking meters, un-monitored parking lots, and bus fares. If no supporting documentation is available, then indicate that this is the case in the appropriate columns in Sections 2 and 3 and be sure to sign the form to attest to the eligibility and accuracy of the un-supported expenses you incurred.
- Reimbursement requests must be made for qualifying expenses by the end of any applicable run-out period or in any case no later than 180 days after the expense was incurred or paid.
- Parking and mass transit reimbursements are limited to the balance in each of your accounts (the amount deducted from your paycheck less previous reimbursements received). Any excess amounts on your claim will be paid once additional dollars are added to your account balance through payroll deductions.
- Parking and mass transit expenses for a spouse or other dependent, if not also employed by the sponsoring employer and separately participating in the plan, are not eligible for reimbursement.
- Qualified parking expenses that are eligible for reimbursement under this plan include the costs of parking a vehicle at or near the employee's place of work or at a location from which the employee commutes to work (for example, the parking lot of a train station so that an employee can continue his/her commute). This includes costs for vehicle parking meters, ramps, and lots, as well as bike parking costs such as for a locker.
- Mass transit expenses that are eligible for reimbursement under this plan include transit passes and fares for mass transportation (including passes, tokens, fare cards, vouchers, etc.) to and from the employee's place of work. The mass transit can be a public or private system. Mass transit also includes %commuter highway vehicles+or %van pools,+ which are defined as companies or individuals in the business of transporting people and that use vehicles with a seating capacity of at least six adults (excluding the driver). The vehicles also must have at least 50% of their passenger capacity regularly occupied and 80% of their mileage driven while transporting commuters.
- Expenses for non-commute related business travel, transportation, and parking are not eligible for reimbursement through either account (i.e. parking costs for an off-site client meeting).

Visit [www.superiorusa.com](http://www.superiorusa.com), then click on "Services" and "Flexible Benefits" on the top navigation bar, for more information and participant flex account access.



**SUPERIORUSA**  
B E N E F I T S

Payroll & Third Party Administration

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