

ATB Financial - ETS @ Work

Associate Enrolment Application

Please complete the *Associate to Complete* sections, sign, and send to IEC Administrator via Transit #420 or via email to iec@atb.com.

Associate to Complete	
Associate name:	
Associate ATB email:	
E-number:	
Work phone number:	
Transit number:	
Are you located in ATB Place?	

Terms and Conditions

- I authorize ATB Financial to deduct from my first pay period of each month the ETS monthly pass charges in accordance with the rates established by ETS.
- I authorize ATB Financial to deduct a \$1 monthly administration fee from my first pay period of each month.
- No refunds or pro-rata adjustments will be considered.
- I understand that ETS rates are subject to change at any time. In the event that the regular pass price changes, the amount deducted from my payroll each month will also change.
- I acknowledge that the percentage ATB Financial contributes for my pass is a taxable benefit.
- ATB Financial and the City of Edmonton are not responsible for replacing lost, stolen, or confiscated passes.
- I agree to participate in the program for a minimum of six (6) consecutive months from the start date. After this initial commitment period, I may withdraw from the program at any time by providing notification to the IEC Administrator via Transit #420 by the 5th of the month to have the pass cancelled for the following month.
- Should I leave the employment of ATB Financial within six (6) months of this agreement, I acknowledge that any amount owing for that given month will be deducted from my last pay cheque as permitted by law. This agreement will then be terminated.
- I will be the primary user of this transit pass, which will be used primarily for commuting to and from work.
- I may not assign or transfer this agreement or sublet my rights to a transit pass without the prior written consent of ATB Financial. Consent may be withheld at ATB Financials sole discretion.
- Participation in this program is subject to the terms and conditions established by the City of Edmonton, outlined in the accompanying Schedule "B" – ETS@Work Terms and Conditions document.
- ATB Financial reserves the right to cancel this program at any time.
- I am a member in good standing with the [Interbranch Employee Club](#).
- I am a permanent, salaried associate of ATB Financial.
- I understand that I cannot be registered for both the subsidized parking program and ETS @ Work program.

I agree to the terms and conditions of this agreement

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Associate to Complete	
Associate signature:	
Date: (mm/dd/yyyy)	

Associate Instructions: Once the above sections are complete, please send a signed copy to the Administrator via Transit #420 or via email to iec@atb.com.

Interbranch Employee Administrator Use Only:	
Reviewed by:	
Associate eligible:	
If no, please explain	
If yes, effective date: (mm/dd/yyyy)	
First transit pass received:	

Interbranch Employee Administrator Use Only:	
Reviewed by:	
Check for subsidized parking:	
Check permanent salaried employee:	
Payroll deductions set up complete:	HED 665
Taxable benefit set up complete:	HED 474
Date first charge to payroll: (mm/dd/yyyy)	