

VEHICLE REQUEST FORM

Please include a copy of your vehicle quote.

Date of Request:

Department:

Contact Name:

Contact Phone #:

Contact Email:

Vehicle Type: Car Truck Small SUV Large SUV Golf Cart Utility Vehicle

Other: _____

Acquisition Type: Addition Replacement Rental

VEHICLE JUSTIFICATION

The following section is required. Please provide detailed explanations

1. Why is the vehicle needed?
2. Will this purchase replace an old vehicle? If so, what will be done with the old vehicle?
3. Total vehicles currently assigned to your department.
4. How will this be vehicle used?
5. Additional Information:

APPROVALS

_____ Approved

_____ Denied

Chief Operating Officer

Date

By submitting this form, you are acknowledging that you are aware of the requirements within Auburn University's Fleet Safety Policy and ensuring that any driver of this vehicle will comply with the requirements of the policy.