

FACILITIES VEHICLE and GAS CARD REQUEST

NOTE: All travel requests are to be sent to the Business Office prior to travel per AP & BP 7400. **This form is for the District Vehicle Request and Gas Card ONLY.** The use of District-owned vehicles by employees shall be limited to transacting official District business. The use of such vehicles for personal convenience is prohibited. When not in use for District purposes, all District-owned vehicles shall be parked on College premises in a location designated for that purpose.

A VALID DRIVER'S LICENSE MUST BE PRESENTED AT THE TIME OF VEHICLE & GAS CARD CHECKOUT

CONTACT INFORM	IATION	
Contact Name:		
	First	Last
Contact Information:		
_	Phone Number (cell phone)	Email Address
Department/Division: _		
	Name	Email Address
TRIP INFORMATIO	<u>N</u>	
Schedule: _		
	Departure Date & Time	Return Date & Time
Destination Location /Address:		
Out of District		
	District Service Area Map on Reverse Side for Ref	ference
Total Number of	Chrome River Pre-Approval #:	
Passengers:	Including Driver	(as applicable)
Please return vehicle wi	_	urement Card Agreement is required. Only District ight to operate a District vehicle off-campus.
AVC Driver Requested	: □No	□Yes
Vehicle or Gas Card Requested:	☐6 Passenger Mini Van (5 + driver)	\square 25 Passenger Bus (AVC Driver Required)
	X Passenger Van (/ + driver)	\square 32 Passenger Bus (AVC Driver Required)
	\Box 10 Passenger Van (9 + driver)	☐ Gas Card
AUTHORIZATION		□ Other
		Date:
Name	Signature	

^{*} SUBMIT SIGNED AND COMPLETED FORM VIA THE FACILITIES SERVICES WORK REQUEST SYSTEM.



DISTRICT SERVICE AREA MAP

