

APPLICATION TO OBTAIN UNIVERSITY VEHICLE ON ASSIGNMENT

Instructions: Vehicle assignments are for a 2-month minimum. Please allow 2 weeks after submission of form for vehicle availability. This form may be completed on the web at: www.fleet.ucdavis.edu. Mail completed form to Fleet Services, Attn: David Franklin or fax to 754-9400. For questions call David Franklin at 752-8229.

Department:	_____	Campus:	_____
Requester's Name:	_____	Phone#	_____
	E-Mail: _____		
Business Contact:	_____	Phone#	_____
	E-Mail: _____		
Principle Driver:	_____	Phone#	_____
	E-Mail: _____		

Accounting Information:	Dafis FAU#:	_____
4-Digit ID# _____	or	Accounting String: _____

Type of Vehicle Requested:	_____	Date Needed:	_____
Length of Time Needed:	_____	or Indefinite	_____
Where will this vehicle be parked:	Lot# _____	Building	_____

Justification: (instruction, research, service function, etc) _____

Indicate Area of Travel: _____

Type of Use:	Field: _____	Local: _____
	Highway: _____	Other: _____

Estimate Average Miles to be Traveled (choose one): Daily: _____ Monthly: _____ Annually: _____

For Pickup or Truck:	Type of Load:	_____
	Estimated Weight of Load:	_____
	Size and Weight of Trailer Pulled:	_____

If this vehicle will be replacing a vehicle currently assigned to your department, what is the current vehicle number? # _____

Print Name of Department Head:	_____
Signature of Department Head and Date:	_____

FLEET SERVICES USE ONLY:	Notes:	_____
Vehicle # Assigned:	_____	_____
Date:	_____	_____