BUS REQUEST FORM

SUNY Cortland Physical Plant Transportation Department Service Group, 753-2129

Instructions

- It is advised that you call the Transportation Department, prior to submitting your request, to check bus availability.
- Please complete your request and submit to SGA Treasurer at least fifteen (15) business days before event.
 (This only applies to student organizations)
- The Transportation Department requires this form to be received ten (10) business days prior to event.
- Buses will <u>only</u> be scheduled with a completed Bus Request Form
- Buses are generally available for use between 6 a.m. and midnight
- Destinations must be within a 200 mile radius of campus.
- Passengers must be university affiliated.

Departure Date Time AM/PM Campus Location Destination: Name of Establishment Street Address City Zip code								
							City Zip Code	
							Campus drop-off location	
							Name of S	Student Organi
				Purpose o	of Trip			
				Number o	of Passengers_			
Account #	<u> </u>	(requir	red)					
Bus Administrator				Estimate your cost:				
Name				# of round-trip miles X \$2.00 = \$				
Title				(400 miles, maximum)				
Cell phone number				+				
-				NDT in hours X \$35.00 \$				
uu				NDT (Non-driving time) = time between reaching each destination				
Signature				departure from same.				
Name of person submitting request Requester's e-mail address				Total Estimated Cost: \$				
SCAT		_1		ved as Official University Business				
SGA Treasurer Approval				Date				
Vice President Approval				Date				
TRANSPORTATION DEPARTMENT USE Non-driving time (billed @ \$35 per hour):				FOR BUSINESS USE: Recharge/Billing Information				
		_	Stop:	Actual miles X \$2.00 \$				
			<u>-</u>	NDT in hours X \$35.00 \$				
Start:	Stop:	Start:	Stop:	Total Amount of recharge \$				
Start:	Stop:	Start:	Stop:	Total Anisona of Teenings 4				
Starting n	nileage:							
Ending m	ileage:							
Total mile	eage:							
Driver name: Bus #								