Student Organization VEHICLE 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 vehicle availability. However, **checking availability does not confirm vehicle.**
- Please complete your request and submit to SGA Treasurer at least 2 weeks before event.
- The Transportation Department requires this form to be received two (2) business days prior to pick-up.
- Vehicles will <u>only</u> be issued with a completed Vehicle Request Form.
- The Transportation Department is open for vehicle pick-ups as follows; 7:30-9:00AM, 9:30AM-12:00PM and 12:30-3:00PM, M-F. Vehicles are **not available** for pick-up **after 3PM** or on week-ends or holidays.
- Drivers and Passengers must be university affiliated.

	Vehicle Pi	ck-Up	& Return				
(7:30-9:00AM, 9:30AM-12:00PM and 12:30-3:00PM, M-F) Destination:	Pick-up; Date Time AM/PM			Return; Date	Time	AM/PM	
Destination: Name of Establishment Street Address City Zip-code	(7:30-9:00AM, 9:3	0AM-12:00P	M and 12:30-3:00PM	, M-F)	(Vehicles may be returned at an	ny hour by using the key dro	p-box located outside the
Street Address Zip-code	Destination: Name of Establishment			•			
Name of Student Organization Chaperone: Name Title Cell #: Campus Dept./location Purpose of Trip No. of Passengers Wehicle Type 7 passenger mini-van 12 passenger van Account # (required) Driver's Name (PRINT) Campus Address							
Chaperone: Name Title			City		Zip-code		
Cell #:	Name of Stude	ent Organi	ization				
Cell #:	Chanerone	Name			Title		
No. of Passengers							
Vehicle Type	Purpose of Tri	ip					
12 passenger van Account #	No. of Passeng	gers					
Campus Address Camp	Vehicle Type						
Telephone Number Driver's Signature Driver's e-mail Address Vehicle Request Approved as Official University Business SGA Treasurer Date Vice President Approval NOTE: The above signature(s) do not constitute vehicle availability. TRANSPORTATION DEPARTMENT USE Wehicle License # Miles driven: X Miles driven X	Account #		(required)				
Telephone Number Driver's Signature Driver's e-mail Address Vehicle Request Approved as Official University Business SGA Treasurer Date Vice President Approval *NOTE: The above signature(s) do not constitute vehicle availability. TRANSPORTATION DEPARTMENT USE Vehicle License # Miles driven: Miles driven X	Driver's Name (PRINT)			Campus Address			
Vehicle Request Approved as Official University Business SGA Treasurer Date Vice President Approval Date *NOTE: The above signature(s) do not constitute vehicle availability. TRANSPORTATION DEPARTMENT USE BUSINESS OFFICE USE Vehicle License # Miles driven X				Telephone Number			
SGA Treasurer Date Vice President Approval Date *NOTE: The above signature(s) do not constitute vehicle availability. TRANSPORTATION DEPARTMENT USE BUSINESS OFFICE USE Vehicle License # Recharge/Billing Information Miles driven: X	Driver's Signature				Driver's e-mail Address		
Vice President Approval Date *NOTE: The above signature(s) do not constitute vehicle availability. TRANSPORTATION DEPARTMENT USE BUSINESS OFFICE USE Recharge/Billing Information X			Vehicl	e Request App	roved as Official University	Business	
*NOTE: The above signature(s) do not constitute vehicle availability. TRANSPORTATION DEPARTMENT USE BUSINESS OFFICE USE	SGA Treasurer				Date _		
Vehicle License # Recharge/Billing Information Miles driven: Miles driven X	Vice President *NOTE: The abov	Approval _ ve signature((s) do not constitute v	rehicle availability.	Date _		
Miles driven: X	TRANSPORT	ATION D	EPARTMENT U	USE_		BUSINESS OFFIC	E USE
	Vehicle License #_					Recharge/Billing Inform	nation
Current IRS Mileage Reimbursement Rate	Miles driven:					Miles driven	_ X
						Current IRS Mileage Rei	mbursement Rate

Total Amount of recharge \$ ___