

2807

SUNY CORTLAND
REQUEST FOR BUS
TRANSPORTATION CENTER
PHYSICAL PLANT SERVICE GROUP

Complete in triplicate and forward to Transportation Center or you may fax your request to 5594. Please allow a minimum of 5 business days to ensure process time of your request. Availability/Unavailability notification will be provided.
HOURS: 7 AM to 3 PM, M-F

Reserve From: Date: _____ Time: _____ a.m./p.m. to Date: _____ Time: _____ a.m./p.m.
Vehicle Type: Bus
Destination: _____
Purpose of Trip: _____
Account to be Charged: _____ No. Passengers: _____
(Or organization description)
Requestor: _____ Telephone Extension #: _____

Vehicle Request Approved As Official University Business

Department Supervisor: _____ Date: _____
Next Level Supervisor: _____ Date: _____
-of-State Travel)

Note: Above approvals for vehicle request does not constitute authorization for travel or guarantee availability of vehicle. Traveler(s) must process travel authorization request or hold a standing travel authorization.

TRANSPORTATION CENTER VEHICLE USE	BUSINESS OFFICE USE -- BILLING INFO
Vehicle Type: BUS	Per Mile Charge (Recharge, Billing)
Vehicle Lic.#: _____ Miles Driven _____	x _____ = \$ _____
Driver's Name: _____	Driver Services (Billed Only to Affiliated Organizations) N/A
Overtime Hrs (invoiced separate via OT Rprt)	
F.T. Employee Straight Time: _____ Hours	x \$14.60/hr. = \$ _____
Temporary Service: _____ Hours	x \$11.70/hr. = \$ _____
Transportation Center Cert.: _____	Total Billing \$ _____

Use of State buses must meet the following:
- Only official University business.
- Passengers must be on University business.

It is required passengers be available for pick-up at the scheduled time. Should no one show for the scheduled time, bus will be canceled.

Revised 7/03