



# ROGERS STATE UNIVERSITY

PHYSICAL PLANT

## REQUEST FOR USE OF MOTOR VEHICLES

Date of Request: \_\_\_\_\_

Name of Person(s) to Travel: \_\_\_\_\_

Give Destination and Purpose of Trip: \_\_\_\_\_

Dates of Travel: \_\_\_\_\_

Hour of Departure: \_\_\_\_\_ AM \_\_\_\_\_ PM Hour of Return: \_\_\_\_\_ AM \_\_\_\_\_ PM

Type/Number of Vehicle(s) Requested: \_\_\_\_\_

**Types of Vehicles:**

Cars:	5 person maximum	Rate: \$0.580
Minivans:	7 person maximum	Rate: \$0.580
Passenger Vans:	10 person maximum	Rate: \$0.740
Bus #54:	24 Passengers	Rate: \$1.810
Bus #47:	37 Passengers	Rate: \$1.810

Department: \_\_\_\_\_

Account Number: \_\_\_\_\_

\_\_\_\_\_  
Department Head Approval

\_\_\_\_\_  
Date

**Driver's Certification:** For my protection and the protection of my department, I agree to inspect the vehicle(s) assigned to me BEFORE I leave the parking lot. If I notice any damage or problem with the vehicle, I will have a Physical Plant employee make a note of the damage BEFORE leaving the lot and retain a copy for my department.