

PACIFIC UNIVERSITY VEHICLE RESERVATION REQUEST & BILLING FORM

INSTRUCTIONS:

1. **Location of Vehicle Reservations Forms:** Facilities Management Office or University Webpage/Facilities Mgmt.
2. **Reservations:** Call Ext. 2799 concerning availability of vehicles.
3. **Request Form:** Complete departmental section of form and return to the Facilities Office or fax it to 503-352-2974. *At the end of each month, the Facilities Office will forward a billing copy to the department secretary.*
4. **Confirmation of reservation:** Only a COMPLETED vehicle reservation form RECEIVED by the Facilities Office confirms your reservation.
5. **Issuance of Keys:** Pick up packets with keys, gasoline credit card and trip record cards at the Facilities Management Office open **Monday thru Friday between 8:00AM to 4:30PM.** **For departure at times other than during working hours, pick up keys before the close of business prior to departure.** Upon return, the packets with credit card, keys, trip record card and fuel receipts should be deposited in the Motor Pool drop box at 2352 Sunset Drive.

STUDENT EMPLOYEE (Check One of the Boxes)

Driver's Name _____ Phone / Cell phone or Extension of Driver or Supervisor of trip _____

Cargo, Car, Minivan, 12-seat Van, 15-seat Bus, Pickup/ # Occupants _____ Destination: City _____ State _____

Type of Function _____ Name of Group/Department _____

Time of Departure _____ AM PM
Circle One Day of Week _____ Date (Month/Day/Year) _____

Time of Return _____ AM PM
Circle One Day of Week _____ Date (Month/Day/Year) _____

Department Budget No. _____ U.C. Box No. _____ Signature of Budget Authority _____

DO NOT WRITE BELOW THIS LINE

Vehicle No. _____ Credit Card No. _____

Trailer Key No. _____ Motor Pool Key _____ Trip Record Card No. _____

BILLING:

Departure Mileage _____ Return Mileage _____ Total Mileage _____

Rate _____

Mileage Charges _____

Misc. Charges _____

(Charges may include: Cleaning fees, not re-fueling, not completing Trip Card, damage due to accident, etc. (See Motor Pool Policy and Procedures)

Driver(s)	
Total Occupants _____	Drive Hour _____

TOTAL CHARGES _____

Date Submitted: _____