Transportation Services Bureau Transportation Request Form

Name:		C	Date:		
Agency:		Di	vision:_		
Driver Accepting Vehicle:					
	(Name Printed)		(Phone Number)		
Vehicle Information					
Vehicle Type (Circle One):	Sub- Compact Sedar	n Compact	t Sedan	In	termediate Sedan
	Mini-Van	12 Passenger	Van	SUV	Pick-Up
Anticipated Rental Date:			Time:		
Anticipated Return Date:			Time:		
Destination:			Numbe	r of Passe	engers:

Notice of Driver Requirements

Prior to operating a Transportation Services Bureau vehicle, all State employees or agency authorized agents must meet the following requirements:

- 1. Drivers must have a valid Driver's License
- 2. Drivers must successfully complete a TSB approved Defensive Driving Course
- 3. The use of the vehicle must be approved by the Driver's agency

Agency Authorization (Required)

The signature of the agency Authorized Rental Representative below certifies agency approval for the rental and use of the requested Transportation Services Bureau rental vehicle.

The signature also acknowledges the Authorized Rental Representative's awareness and understanding of the Driver Requirements which must be met by all State employees and agency authorized agents who will operate this vehicle.

Authorized Rental Representative:

(Signature)

(Date)

(Name Printed)