VEHICLE AUTHORIZATION & TRADE-IN FORM

All vehicles whether purchased or leased, require departmental and administrative review and approval. Complete a separate form for each vehicle request and send to JoAnne G. Jackson, Senior Vice President and Treasurer, Old Queens Building, 83 Somerset Street, New Brunswick, NJ 08901-1281. Please type or legibly print all required information.

DEPARTMENT: ____________________________ CAMPUS: ______________ PHONE EXT _______ FAX _______

REQUESTOR: ____________________________ TITLE: __________________________

REQUESTOR SIGNATURE: __________________________________________________________________________

DEAN, DIRECTOR, OR VICE PRESIDENT SIGNATURE:

_________________________________________ ________________________________
Name and Title Signatures

Select One:

____ New Addition to the Fleet. ___ Replacement Vehicle

Complete items 1-8 Complete items 1-11

New Vehicle Information

1. Type of vehicle requested (attach detailed specs to this form):__________________________________________

2. Business justification for the request:

______________________________________________________________________________________________

______________________________________________________________________________________________

3. Estimated cost of the new vehicle: $______________________________________________________________

4. Expected frequency of use: __ Daily __ Occasional __ Other, please explain:

______________________________________________________________________________________________

______________________________________________________________________________________________

5. Will this be a pool vehicle or permanently assigned to an individual?

Pool vehicle __________ Assigned to an individual __________

6. Operator(s) of the vehicle (include name(s) and title(s)): _______________________________________________

______________________________________________________________________________________________

All drivers of university vehicles must take the Defensive Driving Course offered by Rutgers EMS. Call 732/445-4092 for information

7. Are funds available for this purchase? Yes____________ No____________

If this is a new addition to your department’s fleet, you will also be responsible for the additional insurance costs. Call 732/932-7300 for information.

8. To assist the university in meeting clean air requirements, are you willing to purchase a bi-fuel or natural gas vehicle if available? Yes____________ No __________
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Trade-In or Vehicle Being Replaced Information

Vehicle Disposal:

_____ Trade-in  _____ Surplus  _____ Total Loss/Accident

9. Make and Model  

Year __________________________  Mileage____________________________

RU Vehicle # __________________________  License Plate # __________________________

VIN (Vehicle Identification Number) ____________________________________________

10. Location where the vehicle can be inspected by potential dealers:

Department:______________________________  Campus:________________________________

Address: ________________________________________________________ __________________________

Contact Person: ___________________________  Phone: ______________________________

11. Indicate if the replacement vehicle has any attachments such as a headgear, a snowplow, a salt spreader, etc. that will be installed on the new vehicle, used for trade-in or are now surplus. List below.

____________________________________________________________________________________________

____________________________________________________________________________________________

Please contact William Lasher, senior buyer, at 732/932-4375 Ext. 2303 or lasher@rci.rutgers.edu, if you need assistance with completing this form. Additional copies of this form can be obtained by downloading from the University Procurement and Contracting (UP&C) web site at www.rci.rutgers.edu/~procure/upc.html.

Vehicle Request Approval:

_______________________________________________  Date: ______________________________

JoAnne G. Jackson
Senior Vice President and Treasurer

_______________________________________________ Do Not Write Below This Line

Follow-up Inquiry

____________________________________________________________________________________________

____________________________________________________________________________________________

____________________________________________________________________________________________

____________________________________________________________________________________________