## Fleet Management - Long term lease request form

Dept. Name		
Acct. #:	Date:	
Type of vehicle required (indicate	first and second choice):	
Compact Sedan	Van – 7 Passenger	
Standard Sedan	Van – 12 Passenger	
Truck	Other	
Check type of vehicle assignment	requested (Please check only one):	
	ssenger vehicle for use during working hours. Vehicle remains parked at office use during working hours.	
	npassenger vehicle for use during regular working hours. Vehicle remains at when not in use overnight.	
Class B-1/Special Assign be reported as taxable inc	<b>Ament:</b> Required after normal duty hours to perform duties of the position. <i>May come to driver</i> .	
	ment: Employee has official duty station of his/her home and requires daily m duties of the position. <i>May be reported as taxable income to driver</i> .	
Class B-3/Special Assignmaintenance functions.	nment: Equipped to perform public safety law enforcement or	
office a maximum of one and holidays unless requi	<b>ment:</b> Employee in a continuing travel status (defined as an individual in the day per week). Vehicle must be parked at the duty station on Saturday, Sunday, red for official business or the employee is departing for, or returning from, an e employee's headquarters.	
Estimated date range of lease requ	est:	
Name of primary driver:	PRNR #	
Address of base location:		
Phone number:		
List required special equipment (hitch	h receiver, liftgate, etc.:	
Date vehicle required:		
fleetmanagement@utk.edu, a represvehicle with the requestor. If a vehic	est form to Fleet Management by forwarding the form to sentative of Fleet Management will confirm the availability of the requested cle is available, a formal lease agreement will be sent to the responsible perso the top of this document. The lease agreement will be sent via DocuSign.	
	Signature of requestor	
hone # of requestor	Email of requestor	