**Facilities Management**

*Building F, Room 100*

774.357.2533
*fax* 508.730.3279

Facilities@Bristolcc.edu

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|   |
| **Person requesting vehicle:** |  | **Phone:** |  |
| **Date vehicle required:** |  | **Date of Request:** |  |
| **Time of departure from BCC:**  |  | **a.m.** | **p.m.** |
| **Estimated time of return:** |  | **a.m.** | **p.m.** |
| **Destination of trip:** |  |
| **Person driving:** |  | **License #:**  | **State:**  |
| **Reason for Travel:** |  |
| **Number of passengers:** |  |
| ***(list passengers’ names and addresses below)*** |
| **Passenger:** |  |
| **Passenger:** |  |
| **Passenger:** |  |
| **Passenger:** |  |
| **Passenger:** |  |
| **Passenger:** |  |

 **Vehicle Request Form**

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| **Comments:**  |  |
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***Note:*** *A College Leave Request form should be submitted to your supervisor, as appropriate*

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| **Signature of Driver of Vehicle:** *(If this form is sent by email, your signature will be required when you pick up the vehicle)* |  |

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| **For Facilities Use** |
| **Assigned Vehicle:**  |  |
| **Posted on Master Schedule by:** |  | **Date:** |  |