

# VAN AUTHORIZATION FORM

\_\_\_\_\_  
**Organization/Department Name**

\_\_\_\_\_  
**Destination/Site/Address**

**Billing Contact:**

\_\_\_\_\_  
**Name**

\_\_\_\_\_  
**Email**

\_\_\_\_\_  
**Phone Number**

\_\_\_\_\_  
**Pick Up: Date**

\_\_\_\_\_  
**Time**

\_\_\_\_\_  
**Return: Date**

\_\_\_\_\_  
**Time**

\_\_\_\_\_  
**Driver Name (Authorized University Employee)**

\_\_\_\_\_  
**Cell Phone Number** (in case of emergency)

\_\_\_\_\_  
**Driver's Address**

\_\_\_\_\_  
**Driver's License Number** (with State)

I certify that I have a valid driver's license (excluding a permit or probationary license) to operate a New Jersey State-owned motor vehicle, and I have completed the Van Safety Training course required for use of the SGA Van. I attest to the validity of this Nature and Purpose of Trip information. Vehicles requested must be picked up and operated only by the authorized University employee.

  X    
 \_\_\_\_\_  
**Signature of Driver**

\_\_\_\_\_  
**Date of Van Safety Certification**  
**NOT TODAY'S DATE** – valid for 3 years

- The van keys must be picked up/dropped off at the SGA Suite 220 in the Student Center, Monday thru Friday between 9 a.m. and 4 p.m. If you cannot pick up in those times, please call x64540 to make other arrangements.
- The vans are picked up/dropped off in the gravel parking lot at 70 Sewell Street (Maintenance/Facilities). Please **DO NOT** park vans at **Bole Annex (Public Safety)** or other locations at the Main Campus.
- **Cancellation:** Cancellation notification must be given 72 hours prior to the reservation. **A \$25 cancellation fee will be assessed for late or no notification.**
- **Rush Fee:** Van requests require at least 24 hours advance notice. **Any requests under this notice are subject to a rush fee of \$25.**
- **Gas:** Vans must be returned with  $\frac{3}{4}$  tank of gas (department/organization is responsible for gas costs). **A \$50 refueling fee will be assessed if a van is returned with less than  $\frac{3}{4}$  of a tank.**
- **Mileage:** You must accurately complete the mileage information below on this form. If mileage is not filled out completely and accurately, you will be assessed an additional \$50 mileage error fee.
- Any alterations to the vehicle (inside or out) are strictly prohibited.

**Driver:** Please completely and accurately record date, time, and mileage at the beginning and end of your trip below. On the reverse side, please list any problems or malfunctions noticed while operating the vehicle.

**Van Received:**  
 Date: \_\_\_\_\_  
 Time: \_\_\_\_\_  
 Mileage: \_\_\_\_\_

**Van Returned:**  
 Date: \_\_\_\_\_  
 Time: \_\_\_\_\_  
 Mileage: \_\_\_\_\_  
**Total Miles:** \_\_\_\_\_

**OFFICE USE ONLY**

Denied     Approved

Van Assigned:  
 # \_\_\_\_\_

Notes: