

CAMPUS MOTOR VEHICLE REQUEST FORM

All requests must be submitted to Concierge Canberra: Concierge.CAN@acu.edu.au

Please prepare keys and vehicle log book for the below request:

Campus Location				
Date Completed				
Details of Requestor:				
Name				
Department				
Driver's License No.				
Code for Chargeback L	ocation (T1)		
0	epartme	nt (T2)		
F	Project (T3 if applicable)			
Date Required				
Time to collect				
Date to be returned				
Time to return				
Purpose of Travel			•	
Signed by Requestor				
Approval from hirer's manager: Requests for overnight use must be authorised by the Campus Facility Manager				
Authorised by name/signature				
Position				
Overnight use only: Authorised by Facilities Manager				
To be completed by hirer on return of Keys:				
Does the car need to be cleaned?			YES	NO
What is the Fuel reading		FULL	¾ FULL	LESS THAN ¾ FULL
Any incidents/ issues to)			
report?				