



**Department of Integrative Biology  
Departmental Van Rental Form**



Part 1: Please list **every** person that will be in the van in one of these three categories:

*Primary Driver:	_____	Driver Profile
*Other Drivers:	_____	Driver Profile
	_____	Driver Profile
	_____	Driver Profile

Passengers: (Will NOT be driving)

\_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

Part 2: Please indicate the purpose of the trip, all destinations, expected time of travel and chargeback information:

\_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

Grant #or course code to be charged (.43/km)

Parking tickets, towing charges or toll charges will be charged to your grant.

**67    68    71**

\*Circle the van being rented

\_\_\_\_\_  
 \*Departure Date & Time

\_\_\_\_\_  
 \*Return Date & Time

\*Odometer Reading (out): \_\_\_\_\_ Total Km to be charged: \_\_\_\_\_  
 (back): \_\_\_\_\_

\_\_\_\_\_  
 \*Authorization for Charge (Sign and Print Name)

\_\_\_\_\_  
 Date

\_\_\_\_\_  
 \*Chair's/ Chair's Designate Signature

\_\_\_\_\_  
 Date

\_\_\_\_\_  
 \*Signature of Primary Driver

\_\_\_\_\_  
 Date

\*It is mandatory that these fields be completed **PRIOR** to the keys being given out. Please submit completed form to **Connie Davison (SSC 2484)**. Remember to take a copy of the form with you to **record the odometer readings & return the completed copy with the keys.**\*