

**NDSU Motor Pool Vehicle Reservation Form**  
North Dakota Department of Transportation-State Fleet Services  
North Dakota State University-Thorsen Maintenance Center  
Fargo, ND 58105  
Telephone 701-231-9619 Fax 701-231-8008

I do hereby request the use of Vehicle # \_\_\_\_\_ for the period of \_\_\_\_\_ to \_\_\_\_\_ inclusively, and do agree to comply with the following regulations regarding the use of state-owned vehicles. **Signed vehicle reservation form, inclusive of account codes, must be received before the vehicle is released. (Office hours are Monday-Friday, 7:30 to 4:00.)**

My destination is \_\_\_\_\_. Name vehicle is reserved under \_\_\_\_\_.  
The purpose of the trip is \_\_\_\_\_.

- 1. Vehicles shall be used for official University-sponsored activities only, and a regularly appointed member of the staff shall be responsible for each vehicle. **Driver must possess a valid driver's license, and present their license when picking up the vehicle.**

**Please check one or more of the following drivers:**

- University Employee Driver
- University Student Driver: A "Student Request for State Fleet Vehicle" form must be completed only when no university or state employee is traveling. The form is available on line, under Facilities Management home page, or at the Motor Pool office in Thorson Maintenance Center. The completed form needs to be returned to Motor Pool prior to release of vehicle.
- Volunteer Driver: A "Volunteer Request for State Fleet Vehicle" form must be filled out and returned to the Motor Pool prior to release of vehicle. The form is available on line, under the Facilities Management home page, or at the Motor Pool office.
- Large Passenger (LP) Van Driver: An attachment with driver(s) name and copy(s) of LP van training certificate required prior to release of vehicle. Only certified drivers are eligible. \*

- 2. The vehicles should be brought back by midnight on return date and NO LATER. Double-check the reservation dates you have for the vehicle before you leave. If your scheduled return date is prolonged you must notify the Motor Pool dispatcher immediately. We also ask that if your scheduled trip is canceled, you notify the Motor Pool dispatcher as soon as possible.
- 3. The equipment use form must be filled in with ending odometer reading and signed upon return. The white copy of this form together with the credit card, keys and receipts must be returned to the Motor Pool immediately upon return of the vehicle.
- 4. Driver agrees to comply with all traffic regulations of the state in which the vehicle is driven. The driver will pay all fines. Failure to observe these regulations may result in denial of future use.
- 5. In the event of an accident, the driver must complete an accident report form (found inside packet) and return it immediately to the Motor Pool office. If the accident occurs out of the area you must fax the completed form to the Motor Pool within 24 hours. **All accidents involving state vehicles in which extensive property damage, personal injury, or death has occurred must call State Fleet Services (701-328-3064) as soon as possible.**
- 6. All drivers must give the vehicle a post-trip inspection: which includes filling fuel tank, removing personal refuse, and vacuum if necessary. If vehicle is returned on weekends, holidays, or after 4:00 PM, the travel packet containing the credit card, any receipts, keys and completed equipment use form should be placed in the night deposit slot under the window on the northwest side of the maintenance garage. Please report any mechanical or tire trouble to the dispatcher or in writing on the equipment use form. The vehicle should be locked and parked in the designated motor pool parking area. **Do not park besides gas pumps! Vehicle may be ticketed at driver's expense.**
- 7. For emergency, minor or major repairs, refer to pages 15 and 16 in the State Fleet policy manual found inside travel packet.
- 8. Official vehicles are well marked and carry official license plates. Therefore, parking at private homes, nightclubs and other places where public criticism may occur must be avoided.
- 9. Failure to comply with any of the above regulations may result in denial of future State Fleet Service vehicles.

Department Name \_\_\_\_\_ Departmental contact e-mail address \_\_\_\_\_

Account 521045 Fund \_\_\_\_\_ Dept. \_\_\_\_\_ Program \_\_\_\_\_ Project \_\_\_\_\_ % Billed \_\_\_\_\_

Account 521045 Fund \_\_\_\_\_ Dept. \_\_\_\_\_ Program \_\_\_\_\_ Project \_\_\_\_\_ % Billed \_\_\_\_\_

**Replacement charges not allowable on federal grant funds, (numbers 4000-4999) please use a departmental trust account.**

Address of department \_\_\_\_\_ Phone # \_\_\_\_\_ Date \_\_\_\_\_

RENTAL RATES ARE SUBJECT TO CHANGE

\_\_\_\_\_  
Dean/Department Head Signature or Faculty Advisor (please print)  
**NOTE: Signature approves depletion of funds and validates driver. \***

**Accounts Receivable**

Organizational/Club Name \_\_\_\_\_ Address \_\_\_\_\_  
Organization ID# \_\_\_\_\_