

**TEXAS A&M UNIVERSITY-CORPUS CHRISTI**  
**Utility Cart Purchase Request Form**

Date: \_\_\_\_\_

Department: \_\_\_\_\_

Requisition Number: \_\_\_\_\_ Funding Source: \_\_\_\_\_

Why is your Department requesting a utility vehicle/cart?

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

How will the utility vehicle/cart be powered? Gasoline \_\_\_\_ Electric \_\_\_\_

Where will the utility vehicle/cart be stored? \_\_\_\_\_

Who will be driving the utility vehicle/cart?

Faculty/Staff \_\_\_\_ Student Employee/s \_\_\_\_ Contractor Employee/s \_\_\_\_

**Utility cart training is required by all operators. Training can be found at <http://safety.tamucc.edu>.**

*Department certifies the cart will have the equipment below and contained in the quote.*

**NEW UTILITY CARTS MUST BE EQUIPPED WITH THE FOLLOWING:**

**Signage/Safety Equipment:**

- Rear view mirror.
- Audible alarm signifying the cart is moving in reverse.
- Horn, headlights, break lights, tail lights and turn signals.
- Outside mirrors if utility cart has enclosed cab/or enclosed with cargo box.

\_\_\_\_\_  
Department Head/Designee

\_\_\_\_\_  
Date

**After purchase contact Motor Pool for the following:**

- Departmental name and assigned identification number.
- Orange Safety Flag on a 5' fiberglass rod displayed.
- Laminated cart map attached to front dash.

*Departments: Route completed form through the Environmental, Health & Safety office for review.*

Recommend for approval: Yes \_\_\_\_ No \_\_\_\_ EHS office: \_\_\_\_\_

Date: \_\_\_\_\_

\_\_\_\_\_  
Terry Tatum,  
Executive Vice President, Finance & Administration

\_\_\_\_\_  
Date

Approve \_\_\_\_

Disapprove \_\_\_\_

Return signed form to the Environmental, Health & Safety office at [ehs@tamucc.edu](mailto:ehs@tamucc.edu) or Unit 5876.