UTILITY VEHICLE/CART PURCHASE REQUEST FORM

Date: ______________________

Department:______________________________________________________

Request authorized by:__________________________ Funding Source: ____________________________

Why is your Department requesting a utility vehicle/cart? ______________________________________
________________________________________________________________________________________
________________________________________________________________________________________
________________________________________________________________________________________
________________________________________________________________________________________

What is the major use for this utility vehicle/cart? ____________________________________________

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

Who will be driving the utility vehicle/cart?

Faculty                              Staff
Student Employee/s                 Students
Contractor employees               Other

Maintenance: Is it budgeted for M&O?    Yes    No

Where will the utility vehicle/cart be stored? ____________________________________________

Departments need to ensure that the requested utility cart is designed to “perform its assigned function”.

Approved                         Disapproved

__________________________________________________________        ________________
Terry Tatum,                              Date
Executive Vice President, Finance & Administration

Please return form to the Environmental, Health & Safety office ehs@tamucc.edu.