



REQUEST TO THE FLEET MANAGEMENT BOARD

Part of the responsibility of the County's Fleet Management Board, under County Policy 1350, "Countywide policy on Vehicles", is to:

- Approve the expansion in the number of vehicles.
- Approve any request by a user organization to purchase a vehicle, and
- Ensure that County vehicles have a justifiable business need.

If your organization wishes to obtain an additional new or used vehicle, the Fleet Management Board asks that the following questions be answered. Your completed response is to be submitted to the Director of Salt Lake County Fleet Management, who will in turn submit your answers to the Fleet Management Board for approval to proceed with the acquisition.

Note: if requesting multiple vehicles and the anticipated type of use differs among those vehicles, please submit a separate form for each category of use.

Your request must be on this form. One sided only do not copy two sided. Do not make changes to the letterhead.

Signature section must be completed to obtain approval of the Fleet Management Board.

Form must be submitted one week before Fleet Management Board Meeting.

Have a representative from your agency at the Fleet Management Board meeting that your request is presented.

Provide all Accounting codes; If using project costing codes please include.

Date form completed:

Name and organization number of County Agency requesting a vehicle

- Agency Name:
- Department ID:

Please answer the following questions:

1. Number of vehicles(s) vehicles you are requesting:

8. How are you currently managing without the vehicle(s) requested?

9. Is this request based on a Grant? If “Yes”, please explain Grant.

10. Does the organization have sufficient approved funding to fund the initial purchase cost of the vehicle(s)? If “No”, how does the organization plan on funding this request?

11. Describe why this purchase is economically justified, and why this acquisition would be a better option than renting vehicles as needed from the County Fleet Motor Pool.

12. What are the “outcome measures” to your organization that will be derived from having this vehicle(s)?

13. Is there any reason why the vehicle(s) needed should not be a participant in the Fleet Replacement Fund?

14. Will this vehicle be a take home vehicle and if so why is the vehicle needed on a take home basis?

15. Other Comments:

APPROVALS

REQUESTING DIVISION

(This section must be completed to obtain approval of the Fleet Management Board)

Print Name of Division Director:

Signature Approval of Division Director:

Date of Division Director Approval:

Print Name of Department Director:

Signature Approval of Department Director:

Date of Department Director approval:

Print Name of Fiscal Approval:

Date of Fiscal Approval:

Signature Division Fiscal Approval:

Accounting Code:

If using Project Costing Please Provide Codes:

Fund:

Agency:

Department ID:

Program:

FLEET MANAGEMENT DIVISION DIRECTOR

Print Name of Fleet Management Director: **Evan Harrison**

Signature Approval of Fleet Management Director:

Date of Signature:

CHAIRMAN, FLEET MANAGEMENT BOARD

Print Name of Fleet Management Board Chairman: **Scott Baird**

Signature Approval of Fleet Management Board Chairman:

Date of Signature: