



CAMPUS MOTOR VEHICLE REQUEST FORM

All requests must be submitted to Service Desk servicedesk@acu.edu.au

ATTN: CAMPUS CONCIERGE

Please prepare keys and vehicle log book for the below request:

Campus Location	
Date Completed	

Details of Requestor:

Name			
Department			
Driver's License No.			
Code for Chargeback	Location (T1)		
	Department (T2)		
	Project (T3 if applicable)		
Date Required			
Time to collect			
Date to be returned			
Time to return			
Purpose of Travel			
Signed by Requestor			

Approval from hirer's manager: *Requests for overnight use must be authorised by the Campus Facility Manager*

Authorised by name	
Position	

To be completed by hirer on return of Keys:

Does the car need to be cleaned?	YES	NO	
What is the Fuel reading	FULL	¾ FULL	LESS THAN ¾ FULL
Any incidents/ issues to report?			