

WEC Vehicle Use Request Form

Please fill out and submit this form to WECvehicles@ifas.ufl.edu to make a request to use a WEC vehicle for any period of time.

Name: _____

Email: _____ Phone number: _____

UF affiliation status (e.g. student, faculty, staff, etc): _____

Department: _____

Preferred vehicle type (e.g. truck, van): _____

Dates of use: _____

To/from locations: _____

Benefit/Purpose of vehicle use: _____

Chartfield string for funding source project: _____

I hereby certify that:

-I hold a valid U.S. Driver's License that will be produced at key pickup

-Will utilize WEC vehicles responsibly and appropriately

**-Will fill out Mileage Logs in the vehicle completely and accurately;
turning in logs the 1st of the month.**

Printed Name: _____ Date: _____

Signature: _____