



Facility Services

Northern Arizona University
PO Box 6016
Flagstaff, AZ 86001-6016

928-523-4227
928-523-9481
nau.edu/facility-services

VEHICLE AND MOTORIZED EQUIPMENT PURCHASE REQUEST

This form must be submitted with the purchase requisition

DEPARTMENT INFORMATION

Department	
Contact Person	Phone
Speedchart	Account Name
Siga Authority	
Date	

VEHICLE INFORMATION

Type of Fund Used for Purchase: State Local Grant

Vehicle(s)/Equipment to be purchased is: _____

Additional Vehicle(s)/Equipment (make/model)

Replacement(s) for the following vehicle(s) /equipment:

Unit/Equipment # Make/Model	Odometer Mileage	Condition

Reason/Justification for Purchase: (usage, trips, mileage, number of department users, specialized or multipurpose vehicle/equipment. Etc.)

AUTHORIZATION

Approved by: _____
(Please Print) Budget Head/Sponsor

Date: _____

Signature: _____

Approved by: _____
(Please Print) Dean/Chair/Director

Date: _____

Signature: _____

Approved by: _____
(Please print) Provost/V.P. Admin. Affairs

Date: _____

Signature: _____

FOR TRANSPORTATION DEPARTMENT USE ONLY

Approved by: _____

Date: _____

Note to Fleet Management Division: Please return via fax to (928) 523-8794