

# Fleet Services Division Rental Request Form

(Alteration of this form is prohibited)

Department: \_\_\_\_\_

Division: \_\_\_\_\_

Requested Date/Time: \_\_\_\_\_ Flight # \_\_\_\_\_  
**(mandatory)**

Return Date/Time: \_\_\_\_\_  
**(mandatory)**

Destination: \_\_\_\_\_

Type of Vehicle: \_\_\_\_\_ Off Road   
(compact sedan, intermediate sedan, 4x4 suv, etc.) check if using vehicle for off road

Contact Name & Phone: \_\_\_\_\_

Email Address: \_\_\_\_\_ Fax No: \_\_\_\_\_

Fiscal Email Address: \_\_\_\_\_  
**(mandatory)**

Driver's Name : \_\_\_\_\_

\* Please print or type

Drivers phone number: \_\_\_\_\_

Driver's License Yes  No  FS Employee Initials: \_\_\_\_\_  
To be completed by Fleet Services

Vehicle received by: \_\_\_\_\_

\*Signature of driver

**Agencies are required to enter one line of coding.**

(Use of multiple lines of coding requires prior approval from the Fleet Services Division)

Line #	Fund	Agency	Org	Sub Org	Appr Unit	Activity	Object	Job No.	Percentage
1									
2									
3									
4									
<b>Total Percentage must equal 100%</b>									

**To be completed by Fleet Services**

License: \_\_\_\_\_

Reservation #: \_\_\_\_\_

Mileage: \_\_\_\_\_

**MP** \_\_\_\_\_

Budget Account # (4 digits only)

Agency Invoice # (5 characters only)

Online Rerservation: <http://fleet.nv.gov/WebRes/Home/Home.html>

**Phone/Fax:**

**Carson City** (775) 684-1880

Fax: (775) 684-1888

**Las Vegas** (702) 486-7050

Fax: (702) 486-7042

**Reno** (775) 688-1325

Fax: (775) 688-1309

**Email/Address:**

[Carsonfleet@admin.nv.gov](mailto:Carsonfleet@admin.nv.gov)

750 E King St Carson City

[Vegasfleet@admin.nv.gov](mailto:Vegasfleet@admin.nv.gov)

7060 La Cienega St LV

[Renofleet@admin.nv.gov](mailto:Renofleet@admin.nv.gov)

2550 Terminal Wy Reno

\*NOTE: By signature, driver certifies that they have a valid operator's license, as defined by the Nevada Department of Motor Vehicles, in their possession while operating a state vehicle and that they are cognizant of state laws concerning misuse of state owned vehicles.

**To Be completed by Fleet Services**

**Amount**

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Form MP-2 (Rev 012/19)

CONTRACT TERMS AND CONDITIONS: The renting agency agrees to exercise all reasonable care and observe all traffic laws while using a state vehicle. Except for Acts of God, mechanical failure or identifiable third party accident fault, the renting agency will return state vehicles in the same condition as received, less normal wear and tear, and will be financially responsible for all abuse or physical damage expense. All non-reported accidents/incidents, including accidents/incidents reported after the reporting time requirements, will result in billing to the renting agency for total physical damage sustained to the state vehicle.