



Applie	cation for	Hire of Externa	I Vehicle	
□ City East □ City West	□ Magill	□ Mawson Lakes	□ Whyalla	□ Mt. Gambier
Request Date:				
Last Name:		First Name:		
Business Unit:		Mobile Number:		
Dates Vehicle Required From: To: Flight No. Arrival Flight No. Departure		Time: Time: Time Time		
Type of Vehicle Required (if availal	ble):			
Special Requirements: (Tow bar et	.c)			
Full Name of Driver/s and tel: numl	ber/s:			
Full Name and tel no. of all Passen If necessary, provide these details Does the driver have the appropria Destination: Work Diary – VERY IMPORTANT Regulations link: <u>https://www.nhv</u> legal obligation to complete a curren https://www.nhvr.gov.au/safety-acc	As the driver, I un r.gov.au/safety-a	rES □ NO	/ <u>fatigue-manager</u> ary link:	
Reasons for Travel:				
ACCOUNT CODE AD PG SR TN PD SUB LEDGER (circle)	PD Only	- Cost	Centre	Item
Signed (Cost Centre Manager)			Date:	
Signed (Person Booking Vehicle)	First Name	Last Name	Date:	
	First Name	Last Name		
OFFICE USE ONLY Booking Number: Cost of Hire: Full Name: Customer Advised: Yes / No		Date: Date:		

Please Note: Vehicles are NOT to be used for private purposes