



**REQUISITION FOR BOOKING A VEHICLE** (<https://www.pf.uq.edu.au/fleet/>) **PF322**

Form to be completed by an Authorised UniFi Financial Delegate

Business Unit Name		Vehicle Collection		Vehicle Type (e.g. Sedan, Wagon, van)	Vehicle Return		Private Use* (Y/N)
Business Unit UniFi Number		Date	Time		Date	Time	
Authorised Driver's Name		Single Use <input type="checkbox"/>					
Driver's Mobile no.		Multiple Use <input type="checkbox"/>	Date Ending _____				

<p><b><u>Authorisation of Expenditure</u></b></p> <p><i>I certify that:</i></p> <ol style="list-style-type: none"> <li>The above services are required and are a legitimate charge to the Business Unit Number specified.</li> <li>The driver/s named herein meet the criteria for 'Authorised Driver'.</li> </ol> <p><u>Financial Delegate</u></p> <p>Print Name: _____</p> <p>Signature: ..... Date: _____</p>	<p><b><i>A copy of this form should be retained by the Financial Delegate</i></b></p> <p>Please Tick Campus to Pick Up Vehicle</p> <p><b><i>On completion please fax form to UQ Property and Facilities Division, Fleet Services Section at:</i></b></p> <p><input type="checkbox"/> St Lucia Fax: 53390</p> <p><input type="checkbox"/> Gatton Fax: 57450</p>
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*NOTE: Vehicles may be re-allocated if not collected within an hour of specified collection time.*

**Private Use \*** – Indicate Yes or No if the vehicle is to be parked / garaged off-campus overnight at or adjacent to a private residence.

- A signed PF322 form is required to be to be faxed to the Fleet Booking Officer prior to a vehicle being collected.
- Hirers are reminded that “overhead, interior, under body, windscreen & tyre damage caused is always at the hirer’s risk.”
- User departments maybe charged a cleaning fee if vehicles are returned in a state which is unacceptable and requires cleaning.
- An insurance excess of \$2000 is payable for damage to vehicles. Minor repairs will be charged at cost.

**Request for Internal Services Quote**

Date RISQ raised		Purchasing Business Unit		
Finance Officer		Phone		Email
Description of Goods or Services Purchased				
			Date	
Enter Chartfields				
Operational Unit	Site	Fund Code	Function	Expense Account
Operational Unit	Site	Fund Code	Function	Expense Account
Budget Holder Name		Charge Approved		<input type="checkbox"/> Yes <input type="checkbox"/> No
Financial Delegate				
Signature			Date	