

the vehicle.

Please include a copy of your vehicle quote.

If you do not have a dealer quote, please contact The Office of Fleet Management prior to submission.

Date of Request:	Department:	
Contact Name:	Contact Phone #:	
Acquisition Type: Addition Replace	cement If replacement, please provide vehicle number being su	rpluses:
	VEHICLE JUSTIFICATION	
*The following sections are	e requirement of USG, DOAS and OPB. Please provide detailed expla	nations*
1. Why is the new/replaceme	ent vehicle needed?	
2. What will this replacement	vehicle be utilized for if it is not the same as the original vehicle?	
3. If the new vehicle is not of t	the same type, please explain the difference.	
4. Explain any funding source	other than state funds. Examples are indirect recoveries/tuition.	
5. How is the current vehicle u	used?	
6. Additional Information:		
Ga Tech Fleet Management responsifian underutilized vehicle cannot be	ses: e used for the vehicle being replaced, explain why.	
How much has been spent on repair	rs/maintenance in the last 12 months? This is regardless of the num	ber of miles on

Please return completed forms to Georgia Tech Fleet Management
Main Office: (404) 385-4232 / Fax: (404) 385-2401
Email: GTFleet@gatech.edu
https://facilities.gatech.edu/fleet-services