|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Name of Division/Section: | | | | |
| **Requisition Details:** | | | | |
| Type of Vehicle: | | | No. of Vehicle(s): | |
| Date | Place | | Name of the Official (s) | Purpose |
| From | To |
|  |  |  |  |  |
| Requisition submitted by ( Head of Division/ Section) | | | Signature :……………………………………  Name :……………………………………  Designation:………………….....Date:………… | |
| Vehicle condition:…………….........................  ………………………………………………….  Vehicle No:……………………………………..  Name of Driver:………………………………... | | | Signature of MTO | |
| Recommended by General Manager, AFD & Marketing | | | Signature:……………………………………  Date:………………………………………… | |
| Approved by Chief Executive officer | | | Signature:…………………………………….  Date:…………………………………………. | |

**POOL VEHICLE REQUISITION FORM**