

REQUEST FOR FUEL CHIP KEY

(FOR USE AT TRANSPORTATION SERVICES STATION ON BUCKNER LANE)

Vehicle Information

Vehicle Department _____

MSU Inventory # _____

Tag # _____

VIN# _____

Make, Model, Year _____

Purchase Date _____

MSU # _____

Odometer _____

Color/Description _____

Driver Information

Name _____

Net ID _____

Department _____

Departmental Information

Department Name _____

Contact Person _____

Address/Mail Stop _____

Phone _____

Banner Information _____

(Fund, Org. Acct, Program, Activity)

PLEASE NOTE:

Should your department trade or transfer the above vehicle or should the driver no longer be employed with your department, the key should be returned to the Transportation Department. Once the key is returned to Transportation Services, the account will be deactivated. Transportation Services is not responsible for charges on lost or stolen keys. Once a chip key has been issued, any charges will be billed to the BANNER account provided.

Driver Signature Date

Department Head Date