

# Request for Vehicle Title for International Travel

This title is on loan to your department to facilitate international travel. By signing this form, your department agrees to return the title to Fleet Management Services within three (3) working days of the conclusion of your trip. If you have any questions or need additional assistance, please call 471-0349 or 471-0350.

I. Vehicle Information		
License Plate #	VIN	
Year	Make	Model

II. Department Information	
Requesting department	
Name of person authorizing trip	
Job title	Phone number

III. Trip Information	
Anticipated departure date	Anticipated return date
Purpose of the trip: _____ _____	

IV. Driver Information		
Name of driver	Job title	Phone number
Anticipated number of miles driven in foreign country	Destination	

\_\_\_\_\_  
Name of person receiving the title

\_\_\_\_\_  
Phone number

\_\_\_\_\_  
Signature

## FOR FLEET MANAGEMENT SERVICES USE ONLY

Issued by \_\_\_\_\_

Date issued \_\_\_\_\_ Date Returned \_\_\_\_\_