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DEPARTMENT OF ADMINISTRATION
FLEET MANAGEMENT OFFICE
2101 Washington Street, East,
P. O. Box 50121
Charleston, WV 25305-0121

2014 MODEL YEAR VEHICLE ORDER REQUEST

AGENCY INFORMATION

(FMO Use) ☐

Agency: Administration

Coordinator: _____ **Date:** _____

Coordinator Email: _____ **Telephone # :** _____

VEHICLE MISSION

(FMO Use) ☐

(✓one) ☐ **Increase to Fleet** (**STOP!** Use DOA-FM-009 Permanent Fleet Increase Request.)
☐ **Replacement** (Vehicle must be 2009 or older and displaying 100,000 miles when decommissioned.)

NEW VEHICLE INFORMATION

Billing Code: 000 Scroll down to select billing code.

Funding: **State** ☐ **(✓one)** ☑ **2014 Model**
Federal ☐
Other ☐ _____

Class: Class Selection

Make / Model: _____

Color: _____

Fuel Type: **(✓one)** ☐ **Gasoline** ☐ **Hybrid**
☐ **Diesel** ☐ **Other**
☐ **CNG** ☐ **Electric**

USED VEHICLE INFORMATION

(FMO Use) ☐

Billing Code: 000 Scroll down to select billing code.

Funding: **State** ☐ **(✓one)**
Federal ☐
Other ☐ _____

Class: Class Selection

Make/Year / Model: _____

Mileage: _____

VEHICLE BEING DECOMMISSIONED

(FMO Use) ☐

Class: Class Selection **Year:** _____ **State (garage location):** _____

Make/Model: _____ **Mileage:** _____ **Site/Campus/Office:** _____

License #: _____ **VIN/SN #:** _____ **Building Name:** _____

Room Number: _____

Decommissioning Method:(✓one)
Surplus ☐ **Auction** ☐ **Lease Return** ☐
Trade ☐ **Bid** ☐ **Transfer** ☐

Fund: _____

Dept Activity (vehicle user): _____

Deferred:(✓one) ☐ **120-Day** ☐ **180-Day** ☐ **270-Day** ☐

Justification: **(Use this space to justify deferred decommissioning)** _____

_____

_____

(THIS SECTION IS TO BE COMPLETED BY THE FLEET MANAGEMENT OFFICE)

(FMO Use) ☐

Purchase Order (FMO purchased vehicles): **Approval:** ☐ **Disapproval:** ☐

Date Released to Agency: _____

Form: DOA-FM-005 Revised (26 Sept. 2013)
ENABLING STATUTE: WV Code §5A-3-48 through 5A-3-53
REGULATORY AUTHORIZATION: ***Code of State Rules*** 148 CSR 3