## HAMPSHIRE COLLEGE VAN CHECK OUT/IN FORM

## All drivers/riders must wear masks and safely distance with no more than three people in one van.

## Reservation email and this complete form must be presented to CSS for Van pick up.

Vans must be picked up and returned at times designated on reservation email.

Failure to check in returned van with CSS could jeopardize driver's future use of pool vans.

ALL fields below must be filled out and signed by Driver and CSS staff by end of trip.

Driver Name:			Mileage Out:		VAN #	
Driver cell phone #			Mileage In:			
Alt Driver name & #:				Request	:#	
Date OUT:	Date IN		Cost per Mile: 0.58	Gas Tan	k Full: Y	or N
Emergency, college contact (oth	er than driver):					
Destination/purpose:						
	-63070					
Bill to Account (13 digit # found	d on confirmation e	email) L	Department			
Account Administrator Signature:						
Passenger FIRST and LAST Na	imes!:					
1)						
2)						
3)						
4)						
5)						
6)						
7)						
8 (P4/P5/P6)						
· · · · ·						
Van problems OUT:		-	blems IN:			CSS Init
BODY:		BODY:				
INTERIOR:		INTERIOR:				
LIGHTS:						
ENGINE:						
OTHER:		OTHER		EZPass	ucod: V	l Cor N
Undersigned acknowledges van	is in satisfactory of	conditio	on, except for the	e noted c	lamage	S
ΟυΤ		Ουτ				
Driver's Signature ID #	Date/time		CS officer (print cle	arly)	Unit #	Date/time
IN		IN				
Driver's Signature ID #	Date/time		CS officer (print cle	arly)	Unit #	Date/time
	Date/time			any,	Ont #	Date/time

## CONTACT CSS BY CALLING CAMPUS DISPATCH 413 559-5424