

Rental Authorization Form - Morgan Street

Rev. 04-09-2025

As a supervisor/manager within _____, I am authorizing the rental of a vehicle from DAS for the purpose of conducting agency business.

Our agency accepts the terms and conditions as noted in the motor-pool procedures and rates document, and recognize that we are subject to the penalties as identified, in addition to liability for damage that occurs to the vehicle while in our agencies possession.

Authorization for the rental begins on _____ at approximately _____.
(START DATE) (PICK UP TIME)

Our business need should be completed and the vehicle returned by _____ at _____.
(END DATE) (DROP OFF TIME)

Rental Location:

To confirm this reservation please send an approved copy to DAS.Fleet@ct.gov a minimum of **24 hours before** the desired pick-up time. Vehicles are limited so reservations are confirmed on a first come first served basis. Morgan St. Garage hours of operation are from 7:30am to 4:00pm.

**** Morgan Street Rental Parking, provide vehicle information being parked at Charles Street Lot (if app.):**

Plate #: _____ Make: _____ Model: _____

Preferred Rental Option: ***Based Upon Availability***

- ☐ Electric (\$7/hr;\$32/day) ☐ Hybrid (\$6/hr;\$27/day) ☐ Compact (\$6/hr;\$26/day)
- ☐ Mid-size (\$6/hr;\$29/day) ☐ Small SUV(\$8/hr;\$35/day)

The driver of the vehicle will be _____. In addition to bringing this authorization form, the driver will present his/her state ID and driver's license upon arrival to pick up the vehicle.

The driver has been confirmed to have completed the required General Letter 115 Fleet Driver Training

Print name (Supervisor)

Signature (Supervisor)

Date

Supervisor's phone number

Supervisor's email