

VEHICLE JUSTIFICATION			
UNIT/WING/REGION:		CHARTER NUMBER:	
VAN <input type="checkbox"/> NO. PASS:	SEDAN <input type="checkbox"/>	PICKUP <input type="checkbox"/>	SUV <input type="checkbox"/> 2WD <input type="checkbox"/> 4WD <input type="checkbox"/>
OTHER:			
JUSTIFICATION FOR VEHICLE (NEW, ADDITIONAL OR REPLACEMENT)			
UNIT SIZE	NO. SENIOR MEMBERS:	NO. CADETS:	
AREA OF RESPONSIBILITY:			
MISSION:			
IS THIS A REPLACEMENT VEHICLE? (Yes/No):			
IF REPLACEMENT, WHICH VEHICLE WILL IT REPLACE:			
VEHICLE UTILIZATION RATE OF VEHICLE TO BE REPLACED:			
COMMENTS:			
UNIT COMMANDER SIGNATURE AND REMARKS			
_____		_____	_____
TYPE/PRINT NAME OF COMMANDER		SIGNATURE	DATE (MMM DD YY)
REMARKS:			
WING COMMANDER SIGNATURE AND REMARKS			
_____		_____	
SIGNATURE		DATE (MMM DD YY)	
REMARKS:			
RANKED ORDER OF THIS REQUEST:			
REGION COMMANDER RECOMMENDATION AND REMARKS			
_____		_____	
SIGNATURE		DATE (MMM DD YY)	
REMARKS:			
NHQ CAP/LGT SIGNATURE AND REMARKS			
_____		_____	
SIGNATURE		DATE (MMM DD YY)	
REMARKS:			