

OFFICE OF FLEET ADMINISTRATION  
EQUIPMENT MODIFICATION REQUEST

Date: \_\_\_\_\_

OWNING AGENCY \_\_\_\_\_  
Address \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
Telephone \_\_\_\_\_  
Contact Person \_\_\_\_\_

LICENSE NUMBER \_\_\_\_\_  
VIN OR SERIAL NUMBER \_\_\_\_\_  
PROPERTY # \_\_\_\_\_

YEAR \_\_\_\_\_  
MAKE AND MODEL \_\_\_\_\_  
TYPE OF EQUIPMENT \_\_\_\_\_  
MILEAGE \_\_\_\_\_  
TRANS. STD OR AUTO \_\_\_\_\_  
ENGINE # OF CYLINDERS \_\_\_\_\_  
TIRE SIZE \_\_\_\_\_  
EQUIPMENT G.V.W. \_\_\_\_\_  
TOWED EQUIP G.V.W. \_\_\_\_\_

TYPE OF MODIFICATION REQUESTED  
Include drawings, specs, etc. when appropriate  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

JUSTIFICATION \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

ATTACH THREE (3) WRITTEN BIDS FOR ABOVE DESCRIBED MODIFICATIONS

Supervisors name and title (print) \_\_\_\_\_

**SUPERVISORS SIGNATURE** \_\_\_\_\_