Print Form

Vehicle Assignment Form

☒ New Vehicle ☐ New Assignment ☐ Change of Assignment or Type

Agency: 0503

DAS License Number 32-[redacted]
(for existing assignments only)

Department/Office: DEV

Department Code:

☐ Pool Vehicle
☒ Long Term Assignment

Estimated Annual Miles: 28000

Vehicle to be used for commuting:

Commute Miles:

Commute Code: HBE

Total Estimated Miles: 28000
(Total Estimated Annual Miles is the sum of "Estimated Annual Miles" and "Commute Miles")

Name: Noble Gail A
Last, First M.I

Street Address: [redacted]

City, State, & Zip: [redacted]

Work Phone #: [redacted]

Cell Phone #: [redacted]

Business eMail Address: gail.noble@dev.state.oh.us