

# MV1 Approval to use private vehicle on University business



Name .....

Staff/Student ID.....

Faculty/School .....

Vehicle Registration ..... Vehicle Make, Model & Year .....

Purpose for which the vehicle will be used .....

.....

Date(s) of use .....

I agree that I will not bring a claim against the University, or otherwise seek to make the University liable, for any damage, loss or injury that arises out of the use of a private vehicle for University business.

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Signature of applicant

Date .....

Authorised by

I have sighted evidence that the vehicle is registered and is covered by current comprehensive insurance.

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Dean/Head of School

(This form is to be retained in the School office)

| Fund | Department | Project ID |
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