STATE OF ALASKA TAKE HOME VEHICLE APPROVAL (Business Use Commuting) DEPARTMENT OF ______

Employee Name:	Employee ID Number:
Position:	Location:
Requesting approval for business commuting for the following reason:	
How often will the employee be business comm	outing?
Vehicle license plate number:	
By our signatures below we acknowledge that we understand:	
 Department of Transportation and Public regarding use and storage of state vehicle. Internal Revenue Service regulations go requirements for business commuter use. Requirement for the employee to report after the end of each month. Requirement that commuter's superviso appropriate designated department vehi. Requirement that the designated depart administrative staff will provide the logs. Equipment Fleet no later than the sixth of the sixth o	verning the use, storage, and reporting e of State of Alaska vehicles. their mileage logs within three working days r sign and forward the mileage logs to the cle manager or administrative staff ment vehicle manager or appropriate to the appropriate payroll group and the State day of the month
Employee Name, Signature, Date APPROVED:	Supervisor Name, Signature, Date
Name, Signature, Date (Director/Regional Director, Deputy Commi	_ ssioner, Commissioner)

cc: DOT&PF, State Equipment Fleet Manager Department Vehicle Manager or designee