

Naval Facilities Engineering Command Far East
Public Works Transportation Sasebo

SHORT TERM RENTAL (C-POOL RENTAL) REQUEST

1. Requesting Activity (Name of Command)		2. P.O.C. Name / Phone Number	
		DSN/Comm Cell Phone	
3. Type of Vehicle Required		4. Trip Destination	
5. Rental Period			
CHECK OUT : (Must be M-F 0800~1600)		CHECK IN : (Must be M-F 0800~1600)	
Date:	Time:	➔	Date:
			Time:
6. Name of Primary Driver (or Person who Checking Out)		7. Toll Road Ticket(s) Required ?	
		<input type="checkbox"/> YES <input type="checkbox"/> No	
8. ACCOUNTING DATA CHARGEABLE			
<input type="checkbox"/> UIC / DODAAC		<input type="checkbox"/> FUNDING DOCUMENT NUMBER	
_____		_____	
9. SIGNATURE OF REQUESTOR		10. DATE (dd/mmm/yy)	
11. REMARKS (Relevant trip information)			
Email Address: M-SA-NAVFAC-FE-SASEBO-TRANSPORT-DEPT-GD@OCONUS.NAVY.MIL			
Phone / Fax : <i>DSN 252-3326 / 3534 / 3377 Fax 252-2203</i>			

NAVFAC-FE - SASEBO Det. 11240/19 - REV. 7 (01 NOV 19)