New and Used Passenger Vehicle Approval Request

# About this form

State agencies, colleges, and universities use this form to request approval from the director of the Department of Enterprise Services (DES) to purchase or lease new and/or used passenger motor vehicles (sedan, station wagon, sport utility vehicle (SUV), van, or light-duty truck). In addition, DES Fleet Operations utilizes this form for any request for placement of non-passenger motor vehicles (cargo van, ¾ ton or higher trucks). **A separate approval is required if your agency desires to purchase any mix or combination of ICE/BEV or any variety of vehicle sizes.** After selecting a vehicle type, please indicate the quantity requested. [RCW 43.19.648](http://www.google.com/url?url=http://apps.leg.wa.gov/rcw/supdefault.aspx%3Fcite%3D43.19.648&rct=j&frm=1&q=&esrc=s&sa=U&ei=sMKQU7z6GpTcoASsj4HwBw&ved=0CBcQFjAA&usg=AFQjCNEdPDO-jAn1s6szHoN6XmJGW0AcEw) requires all state agencies, to the extent practicable, to purchase electric vehicles. [WAC 194-28-070](http://www.google.com/url?url=http://apps.leg.wa.gov/WAC/default.aspx%3Fcite%3D194-28-070&rct=j&frm=1&q=&esrc=s&sa=U&ei=zcKQU8zqLo66oQSjxYD4Dg&ved=0CBcQFjAA&usg=AFQjCNHhkyU3X44mk_nqtBcGc8GaOQvCrg) defines what is practicable.

# About requesting a new passenger vehicle

A vehicle being replaced with a new purchase must meet minimum retirement mileage or be more than 7 years old:

* 100,000 miles for gas-powered sedans and station wagons;
* 115,000 miles for hybrid sedans and minivans;
* 115,000 miles for small to mid-size SUVs and trucks;
* 130,000 miles for full-size trucks, SUVs, and vans.

Vehicle purchases should be included in the agency’s biennial purchasing plan.

Executive and small cabinet agencies not requesting a Battery Electric Vehicle (BEV) must obtain SEEP approval per [Executive Order 21-04](https://www.governor.wa.gov/sites/default/files/exe_order/21-04%20-%20Zero%20Emission%20Vehicles.pdf) prior to submitting this form to DES. [Complete the SEEP Electric Vehicle Purchase Exemption Form](https://app.smartsheet.com/b/form/8dca5e9a3526473c90bdf4e57b91dd6b).

| Part A – Agency Request  Requesting agency to complete this part |
| --- |
| Date of request:       Date vehicle needed: |
| Agency name:       Division or unit: |
| Vehicle Coordinator or Agency transportation officer name:       Phone number:       Email: |
| Requested by:       Phone number:       Email: |

|  |
| --- |
| Purchase justification  The information in this section is used to show that only a new vehicle will meet your agency’s needs. |
| Will this vehicle be managed by DES Fleet Operations?  Yes  No -   * If no, please explain how this vehicle will be fueled/charged: * If no- please explain how maintenance will be performed on this vehicle * If no, please explain why it is more cost effective/efficient for your agency to manage this vehicle internally rather than leasing through DES per [RCW 43.19.600](http://apps.leg.wa.gov/RCW/default.aspx?cite=43.19.600).   If Yes- What account will this vehicle be billed to (i.e., agency 179-000) |
| Is this purchase included in the agency’s biennial purchasing plan?  Yes  No If no, please explain in detail. |
| Is this requested vehicle a replacement?  Yes  No  If this is a replacement purchase; what is the license plate #, year, make, model, and odometer reading of the vehicle being replaced?  Plate       Year       Make       Model       Odometer |
| What is the primary purpose/function for needing this vehicle (i.e., what program will this vehicle support, what mission will it be used to fulfill, etc.). |
| Will this vehicle be assigned to a specific position?  Yes  No If yes, please fill out the position information that this vehicle will be assigned to  Position Title:       Position Number: |
| Prior to purchasing a new or used vehicle, has your agency verified existing underutilized vehicles in your agency could not be leveraged to fulfill this need?  Yes  No. If no, please explain why underutilized vehicles could not be leveraged to fulfill this need |

|  |
| --- |
| **Vehicle Purpose and Anticipated Usage**  The information in this section is used to match your request to the most appropriate vehicle to meet your needs. |
| The Governor’s [Executive Order 21-04](https://www.governor.wa.gov/sites/default/files/exe_order/21-04%20-%20Zero%20Emission%20Vehicles.pdf) requires executive and small-cabinet state agency to procure battery-electric vehicles (BEV) (or better emerging zero-emission technology) to meet goals listed in the Executive Order by specific dates. Agencies must obtain SEEP approval for any non-BEV purchases.  For vehicle classes in which BEVs are not available, agencies shall prioritize the most cost-effective low-emission options available.  Will a BEV be used to meet the goals in accordance with the Governor’s [Executive Order 21-04](https://www.governor.wa.gov/sites/default/files/exe_order/21-04%20-%20Zero%20Emission%20Vehicles.pdf)?  Yes  No  For executive and small cabinet agencies not requesting a BEV is your SEEP approval attached?  Yes  No  For non-cabinet agencies, if you selected no, please provide your reasoning in detail here. |
| What is the frequency of use? (# of days per week this vehicle is anticipated to be used) |
| How many miles is this vehicle estimated to travel each month?       Each day? |
| Will this vehicle travel “off road”?  Yes  No If Yes, what percentage of time? |
| What counties will this vehicle service? |
| What city will be the primary storage location for this vehicle? |
| Based on the [Enterprise-Wide Transportation Policy for Permanently assigned vehicles,](https://des.wa.gov/sites/default/files/public/documents/About/rules/EnterpriseTransportation/Procedure1.PermaAssignedMV.pdf?=92e1d) what usage category would this vehicle(s) be categorized?  General Use  Campus/Institution  Local Area/Alternat Commute  Specially Equipped  Special Purpose |
| If your agency leases vehicles from DES Fleet Operations, has your agency recently received a denied vehicle waiver in this same stored location within the last 12 months?  Yes  No |
| What type of cargo will this vehicle carry?       What is the approximate weight? |
| Will this vehicle be used for towing?  Yes  No If yes, what is the weight the vehicle will need to tow? |
| How many passengers will this vehicle typically carry?  How often will it carry multiple passengers? (Days/month) |

|  |
| --- |
| Preferred type of passenger vehicle (as defined in [**RCW 43.19.560**](http://apps.leg.wa.gov/RCW/default.aspx?cite=43.19.560)) |
| **New Vehicle/s**   Biofuel (if available) |
| **Used Vehicle/s**   Biofuel (if available) |
| **Sedan/Station Wagon:** Will this vehicle be a Full Electric  Yes  No  Quantity |
| **SUV:** Will this vehicle be a Full Electric  Yes  No  Compact Size (i.e., Ford Escape, Nissan Rogue) Quantity     4x4 – Quantity  Intermediate/Mid- Size (i.e., Ford Explorer, Chevy Traverse) Quantity     4x4 - Quantity  Large Size (i.e., Chevy Tahoe, GMC Yukon) Quantity     4x4 - Quantity  Full Size (i.e., Chevy Suburban, Ford Expedition) Quantity     4x4 - Quantity |
| **Van:** Will this vehicle be a Full Electric  Yes  No  7-passenger mini Quantity  8-passenger mini Quantity      12-passenger full-size Quantity  10-passenger full-size Quantity      Cargo Quantity  If Cargo: Is there roof height restrictions?  Yes  No If Yes, please specify |
| **Truck:** Will this vehicle be a Full Electric  Yes  No  Compact Quantity     4x4 - Quantity  ½ Ton Quantity     4x4 - Quantity  ¾ Ton Quantity     4x4 - Quantity  1 Ton + Quantity     4x4 - Quantity |
| What vehicle options/configuration would best fit your need (i.e., station wagon, crew cab, long bed, etc.) |
| Are there any specific color requirements for this vehicle?  Yes  No  If Yes, please specify the color and explain the need  Colors to avoid |
| Are any modifications/upfits or additional options needed on this vehicle?  Yes  No  If Yes, please mark what is needed below:  Tinting  Cargo Cover  Roof Rack  Cargo Barrier  Vehicle Wrap  Confidential Plates  Tire Chains  Vehicle Safety Kit  Weapon Safe  Emergency Lights  Siren  Mobile Radio  Wheelchair Lift  ADA  Other (Specify) |
| Is ground clearance an issue?  Yes  No  If Yes, please explain in detail the required height or ground clearance specifications |
| Additional Comments |

| Part B – Agency Approval  **Purchasing Agency Director or their approved designee to complete this section** |
| --- |
| Agency Director or Approved Director Designee’s Signature (required): Date:    *If signing as a designee, by my signature I affirm that I have been given the authority to sign on behalf of the agency director.* |
| Comments |

Submit signed form by email to:

[Vehicleapproval@des.wa.gov](mailto:Vehicleapproval@des.wa.gov)

| **Part C – DES Approval**  **DES Director to complete this section** |
| --- |
| Approved, request meets purchase criteria  Denied, request does not meet purchase criteria |
| DES Director’s Signature (required):       Date: |
| Comments/Conditions:  Approved Vehicle Buy Number: |