



University of
Massachusetts
Amherst

Vehicle Acquisition Form

Request for M number assignment
Request for Motor Vehicle Registration
Request for Fuel Card issue

Department _____ Contact Person _____

Address _____ Phone _____

Fax _____ Email _____

Vehicle Purchased from: _____ PO Number _____
(include phone number)

Purchase Price _____

Speedtype for REPAIRS _____ Speedtype for FUEL _____
Grant Funded? Y / N Exp. Date / / Grant Funded? Y / N Exp. Date / /

Date of Purchase _____ Miles at Purchase _____

Vehicle Year _____ Vehicle Make _____ Vehicle Model _____
2010 Chevrolet F350/Sedan

VIN _____

Vehicle Model Number _____ Vehicle COLOR _____
W310 White

Vehicle Type _____
Pickup/Box Truck

Vehicle Engine Size and Make _____ Number of Cylinders _____
5.4L EFI V-8 4,6,8

Type of Fuel _____ Alternative Fuel? Y / N Hybrid? Y/N
Unleaded/diesel

Plate Number _____ Registration Date _____

Vehicle Received by _____ Vehicle Accepted by _____

Fleet Services Office
Physical Plant Building
413.545.0606
413.577.1600 fax

Transportation Services
UMass Bus Garage
413.545.4682
413.545.1930 fax
transport@admin.umass.edu

Property Office
405 Goodell Building
413.545.0700
413.545.4233 fax