



## AUTO RENTAL RESERVATION & AUTHORIZATION FORM Non-Faculty, Non-Staff, Guests, Students and Teams

The B.C. Provincial Government or CAUBO rental rates apply unless other arrangements are in place directly with UVic. This form when completed and signed by an authorized UVic Account Holder and a Purchasing Officer, will authorize the Auto Rental Firm listed on this form to apply charges to UVic's Scotiabank Visa card as provided with this form.

**The form is invalid unless all fields (underlined spaces) are completed.** This form **may not** be used for UVic **–UVic faculty, nor staff (employee) travel** **This form is NOT to be used by individuals during relocation or moving.**

Rental Agency Name: _____ Address: _____ Contact Name: _____ Telephone: _____ Fax: _____ E-Mail: _____ Rental/Contract No. [ _____ ]	<b>CONFIRMATION No.:</b> _____  UVic Contact Name: _____ UVic Faculty/Department: _____ Telephone: _____ Fax: _____ E-Mail: _____
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This Section to be Completed for all Auto Rentals  
 Renter Name: \_\_\_\_\_

(Print ~~809 250 430 608~~ tw [(r)-s (m)]: enallaIA)