



TDOT Motor Vehicle Exception Form

Name: _____

Date(s) of Travel: _____

Date Requested: _____

Department ID: _____

Reason for Exception (check one):

Employee used TDOT vehicle, no Fuelman station(s) were available. Reimbursement for gasoline purchases is requested.

Employee was approved to use personal vehicle. Reimbursement for gasoline purchases is requested.

A TDOT motor pool vehicle was not available at time of departure, reimbursement for mileage is requested.*

*requires Motor pool manager signature

Employee Name (print)

Employee Signature

Appointing Authority (print)

Appointing Authority Signature

*Motor pool manager if applicable (print)

*Motor pool manager signature if applicable