

PERSONAL VEHICLE LOG

Please fill out the information below and submit this document along with your Completion Report if you are using your own vehicle.

Applicant Name _____

Project Title _____

VEHICLE OWNER INFORMATION

Vehicle Owner's Name: _____

City of residence: _____

If not Applicant's vehicle, what is the relation to applicant: _____

DATE(S) OF USE

Start Date: _____ End Date: _____ Total Days: _____

Explain any variances from your original projected mileage or total travel days:

VEHICLE INFORMATION

Odometer Reading:

Departure: _____ Return: _____ Total Trip KMs: _____

A detailed tour itinerary must also be submitted along with your Completion Report.

SIGNATURE

I certify that all information on this form is true and accurate.

Signature of Applicant: _____

Date: _____