



State of Oklahoma
Department of Central Services
Fleet Management Division

Vehicle Inventory Data Sheet

email: mfr@dcs.state.ok.us / fax: 405-525-2682 / 3301 N. Santa Fe, Oklahoma City, OK 73118 / 405-521-2206

General Information:

Agency Name: _____ Agency Number: _____
Fleet Contact: _____ Title / Position: _____
Phone: _____ Fax: _____ E-Mail: _____

Vehicle Assignment and Location:

Vehicle Office Assignment: ☐ Primary State Office ☐ Field Office ☐ Work From Home (submit [Form 022](#))
Vehicle Assignment County (name & #): _____ City: _____ Zip: _____
Shared Vehicle: ☐ Yes ☐ No, employee name: _____
Vehicle driven from home to work: ☐ No ☐ Yes (submit [Form 022](#))

Vehicle Acquisition Data:

Acquired through (check one): ☐ Purchase ☐ Seizure ☐ Donation ☐ Transfer
Vendor: _____ Purchase Order #: _____
Purchase Amount: _____ Beginning Odometer / Hour: _____ Delivery Date: _____

Vehicle Initial Inventory Data:

Vehicle Agency #: _____ Vehicle Identification Number (VIN – 17 digits): _____
Vehicle Marked: ☐ Yes ☐ No Tag # (must attach copy of title): _____
Year: _____ Make: _____ Model & Trim: _____ Color: _____
Vehicle Designation: ☐ Passenger, # of seats: _____ ☐ Cargo ☐ Truck
Body Type (check one): ☐ 2-door ☐ 3-door ☐ 4-door ☐ Extended Cab ☐ Quad/Crew Cab
Drive Train Type: ☐ FWD ☐ RWD ☐ AWD ☐ 4WD
Special Equipment: ☐ Lift ☐ Hitch ☐ Bed Cover Other: _____

Fuel Supply Information:

Fuel Supply: ☐ OEM ☐ Converted Tank(s) Capacity: _____
Dedicated Type: ☐ Diesel ☐ Unleaded ☐ CNG ☐ Propane ☐ Electric
Bi-Fuel Type: ☐ Flex Fuel ☐ Bi-Fuel CNG ☐ Bi-Fuel Propane ☐ Hybrid

Disposal /Sale Information:

Date: _____ Ending Odometer / Hour: _____ Amount: _____
Disposal Type (check one): ☐ Open Auction ☐ Consignment ☐ Sealed Bid ☐ Transfer ☐ Theft ☐ Wreck