



STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS  
 DEPARTMENT OF ADMINISTRATION  
 Division of Capital Asset Management and Maintenance  
 Office of State Fleet Operations

**WAIVER TO PURCHASE HYBRID/ELECTRIC VEHICLE**

**\*\*\*\*PLEASE TYPE REQUIRED INFORMATION**

DEPARTMENT NAME/DIVISION: \_\_\_\_\_

NAME OF PERSON SUBMITTING REQUEST: \_\_\_\_\_

DEPARTMENT DIRECTOR/DEPARTMENT HEAD (required):

PRINTED NAME \_\_\_\_\_

SIGNATURE: \_\_\_\_\_ DATE \_\_\_\_\_

(1) Description of vehicle being requested: \_\_\_\_\_

(2) Reason for waiver request. (“a” **OR** “b” below): **(PLEASE CHECK ONLY ONE)**

a.  UNAVAILABLE IN VEHICLE CLASS

CONFIRMED/STAMPED BY STATE FLEET

b.  NOT PRACTICAL FOR INTENDED USE (please explain below)

Form must be completed, signed and returned to:  
**THE OFFICE OF STATE FLEET OPERATIONS**

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DENIED

APPROVED

\_\_\_\_\_  
 DIVISION DIRECTOR, CAPITAL ASSET MANAGEMENT AND MAINTENANCE

\_\_\_\_\_  
 DATE