



**WEBB COUNTY
FORFEITED/DONATED
VEHICLE PROTOCOL FORM**

TO BE COMPLETED BY DEPARTMENT RECEIVING VEHICLE

Vehicle was seized by: (please check) Sheriff X District Attorney _____

Department receiving vehicle: Webb County Sheriff's Dpt.

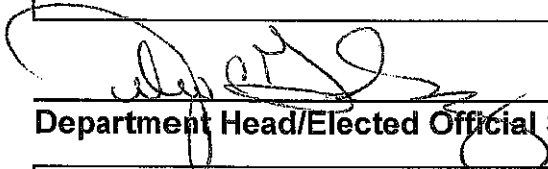
In your current budget, do you have: (please check)

- A mileage line item? Yes _____ No X
- A fuel/lubricant line item? Yes _____ No X
- A repairs & maintenance line item? Yes X No _____
- Are you replacing a vehicle? Yes _____ No X

Number of County vehicles currently in your department: _____

Who are the employee (s) who will be assigned to donated vehicle, and have they met the following requirements?

EMPLOYEE NAME	DRUG & ALCOHOL	DRIVER ORIENTATION SCHEDULED DATE
ALL WEBB COUNTY SHERIFF'S EMPLOYEES	TBA	TBA


 2/10/16
 Department Head/Elected Official Signature Date

TO BE COMPLETED BY ROAD & BRIDGE

What is the current mileage of the vehicle? -0
 Does the vehicle meet state inspection standards? yes
 Estimated cost of repairs: -0-
 Estimated Blue Book Value: _____

 J.L. Rodiguez _____
 Department Head Approval Department Head Denial

COMMISSIONER'S COURT DATE OF APPROVAL _____
 Minutes must be attached

TO BE COMPLETED BY THE PURCHASING DEPARTMENT

VIN 51GBU101XEL014074 License _____

Year 2014 Make TARTER Model 5X10ft

Will vehicle be: (please check)

An unmarked vehicle? Yes _____ No _____

An exempt vehicle? Yes _____ No _____

Has the title for this vehicle been received? Yes _____ No _____

(Copy of title must be attached)

Purchasing Signature **Date**

TO BE COMPLETED BY THE RISK MANAGEMENT DEPARTMENT

Has compliance with the following policies been met?

EMPLOYEE NAME	MVR	DRUG & ALCOHOL	DRIVER ORIENTATION SCHEDULED DATE

Has the vehicle been: (Please check and initial)

Issued a liability insurance card? _____

Added to the Automobile Liability Insurance? _____

Risk Management Department **Date**

TO BE COMPLETED BY ROAD & BRIDGE

What is the vehicle's Unit Number? _____

Has a key been issued? Yes _____ No _____

Have other devices, if necessary, been installed? Yes _____ No _____

Has the vehicle been added to the County Vehicle Inventory? Yes _____ No _____

Department Head Signature **Date**

