



STATE OF LOUISIANA
REQUEST FOR PERSONAL ASSIGNMENT AND/OR
HOME STORAGE OF STATE-OWNED VEHICLE

DA 5210
(DAMV-2)
Rev. 2/16

NEW UPDATE DELETE

Originating Date

Form fields for State Employee's Name, Job Classification, Driver's License No., Office/Section, Make/Model, Model Year, Serial No., License No., and Property Tag No.

- A. PERSONAL ASSIGNMENT of the above vehicle to the employee named is requested for the following reason(s). (Check appropriate blocks.)
01. State employee is in a position which requires, in performance of assigned duties, that the employee drive in excess of the break-even mileage...
02. State employee is in a position of law enforcement and has the power to arrest and uses this power in the regular performance of his/her duties.
03. State employee is in a position which requires, in performance of assigned duties, regular and unscheduled use of a special use vehicle...
04. Employee is a statewide elected official, Governor's Executive Counsel, the Commissioner of Administration, Secretary of an executive department...
05. Other. Please detail:

- B. HOME STORAGE of the above vehicle by the employee named is requested for the following reason(s). (Check appropriate blocks.)
01. Employee is a law enforcement officer with the power to arrest who uses this power in the regular performance of daily job duties...
02. Employee is provided with transportation to and from the workplace as a condition of employment approved at the time of employment...
03. Employee's job duties require the use of a special use vehicle or vehicle with special equipment installed outside of normal working hours...
04. Employee is a statewide elected official, Governor's Executive Counsel, the Commissioner of Administration, Secretary of an executive department...
05. Other. Please detail:

Form fields for Address of Employee Residence, Address of Official Domicile, Address of Nearest Dept. Facility Where Vehicle May Be Parked, and ONE WAY MILEAGE BETWEEN RESIDENCE AND NEAREST DEPT. FACILITY.

BY signing this agreement, the Agency Head, Transportation Coordinator and State employee attest to the accuracy of the information, which is subject to audit or investigation at any time.

The State employee also hereby acknowledges that the use of a State-owned, State-rented, or State-leased vehicle is not permitted for personal purposes without the special approval of the Commissioner of Administration, and that unauthorized use shall subject the employee to possible disciplinary action, up to and including termination.

The State employee understands that he or she is liable for all requirements which are or may be imposed by the Internal Revenue Service on the use of state-owned vehicles for personal assignment and/or home storage.

If any of the information supplied above changes during this period, the employee shall immediately notify the Agency Transportation Coordinator by updating a copy of this form, including the effective date of the change.

The State employee certifies that a completed and signed Louisiana State Employee Driver Safety Program Authorization/Driving History Form is on file with his or her agency.

State Employee Signature

Request Approval Period:
through June 30,

Agency Transportation Coordinator Signature

Agency Head Signature

Approval table with columns APPROVED and DISAPPROVED for A. Personal Assignment and B. Home Storage/Commuting. Includes Commissioner of Administration or Designee and Date fields.