

Williamson County Vehicle Status Change Form

To be completed by **department** releasing vehicle:

1) Identify Vehicle: KB121653 Vehicle Identification Number			210 Department		UR9104
					Door Number
N/A	1991	MILLER		BOBCAT 225G	BLUE
License Plate Number	Year	Make		Model	Color
2) Reason for Status Change:	:				
☐ Accident					
Received: 1. Williamso	on County Fle	et Incident/Crash/	Vandalism Re	port	
2. The Offic	ial Accident F	Report			
3. A Vehicle	Insurance / L	itigation Form			
☐ High Mileage: List act	ual mileage	S			The state of the s
Not mechanically sou	nd REPAIR P	ARTS NO LONGER A	VAILABLE		
Other: Explain					
ـــــــا 3) Elected Official/Departme	nt Head/Aut	thorized Staff	7	0	Date 1//3//5
Print Name Tallon	s Evere	tson Signat	ture <i>fer</i>	rontue	Date 11/3/13
To be completed by Fle			/		
1) Method of Status Change	This vehicle	e is to be conside	red for: (Sele	ect one)	
SALE at the earliest auct	ion	C	TRANSFER b	etween county d	epartments
← SALVAGE for parts				RECEIVE	
TRADE-IN for new assets the county	s of same gen	eral type for		B Adam and Emmil W E.	
SALE to a government organization in the cou	entity / civil o nty at fair ma	r charitable rket value		DEC - 1 201	5
← Other			v	AUDITOR'S GTER	CE EXAS //
Print Name R Ruog	eres	Signature	Kn	f-	Date 11/3/15
To be completed by Hu	man Resou	urces Analyst:	- 1	(
All applicable accident pape	rwork has be	een received and	I there is no	litigation pendi	ng on this unit. It has been
cleared for retirement.		6	2		
HR Release Authorization:)ar	atous	\sim		
To be completed by Buc			sfers):		
Transfer has been reviewed	and approve	ed:			
Signature:					

All forms must be routed to the County Auditor's Office once the final authorization and approval have been received.



Williamson County Vehicle Status Change Form

To be completed by **department** releasing vehicle:

1) Identify Vehicle: 1FTRX12W17NA54690			210	UB0718	
Vehicle Identification Nu	ımber		Department	Door Number	
1175672	2007	FORD	FI50 XCAB	WHITE	
License Plate Number	Year	Make	Model	Color	
) Reason for Status Change;	:				
☐ Accident					
Received: 1. Williamso	on County Fle	eet Incident/Crash	/Vandalism Report		
2. The Offic	ial Accident I	Report			
3. A Vehicle	e Insurance /	Litigation Form			
⊠ High Mileage: List act	ual mileage	173671			
☐ Not mechanically sou	nd	11-1			
Other: Explain					
)	
) Elected Official/Departme	ent Head/Au	thorized Staff	a()	/ Data illa lir	
Print Name Tellon	N		ture prion Que	tue Date 11/3/15	
o be completed by Flee	et Service	s Manager:		AND THE PARTY OF T	
) Method of Status Change:	: This vehicle	e is to be conside			
SALE at the earliest auct	tion		TRANSFER between count	ty departments	
C SALVAGE for parts			REC	CEIVED	
TRADE-IN for new assets	s of same ger	neral type for			
the county			DEC	- 1 2015	
SALE to a government of	entity / civil o	r charitable			
organization in the cou	nty at fair ma	irket value	AUDI	rong office	
	ALSO AND A PROPERTY OF THE PRO				
C Other					
C Other 2 Por	0 Gens	Signature	11	Date 11/3/15	
Print Name 2 Col	man Reso	 urces Analyst	Ry	Date 11/3/15	
o be completed by Hur III applicable accident pape	man Reso	 urces Analyst	Ry	11	
Print Name 2 Col	man Reso	 urces Analyst	Ry	Date 11/3/15	
o be completed by Hur III applicable accident pape	man Reso	 urces Analyst	Ry	Date 11/3/15	
o be completed by Hur old applicable accident pape leared for retirement.	man Reso erwork Mas b	urces Analyst	there is no litigation pe	Date 11/3/15	
o be completed by Hur of the complete by the complet	man Reso erwork (As b get Office	e (only for tra	there is no litigation pe	Date 11/3/15	

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Williamson County Vehicle Status Change Form

To be completed by **department** releasing vehicle:

1) Identify Vehicle: 1GCEC19C09Z153342			210		UB0934	
Vehicle Identification Number			Department		Door Number	
1194207	2009	CHEVROLET		1500 XCAB	WHITE	
License Plate Number	Year	Make		Model	Color	
2) Reason for Status Change:						
Accident						
Received: 1. Williamso	n County Fle	et Incident/Crash/V	'andalism R	eport		
2. The Officia	al Accident f	Report				
3. A Vehicle	Insurance / I	itigation Form				
│ │ │ │ │ │ │ │ │ │ │ │ │ │ │	ıal mileage	183117				
	nd REAR AX	LE FAILURE				
Other: Explain						
3) Elected Official/Departmer	nt Head/Au	thorized Staff		7 (,	1 Date 1/3/15	
Print Name Tello	JEW	Kov Signatu	ire X fer	sonCi	Fr. 13(5)	
To be completed by Flee	t Service	s Manager:				
1) Method of Status Change:	This vehicle					
SALE at the earliest aucti	on	CI	RANSFER b	etween county o	departments	
C SALVAGE for parts				SECE	ven	
TRADE-IN for new assets the county	of same ger	eral type for				
SALE to a government el organization in the coun	ntity / civil o ity at fair ma	r charitable rket value		DEC -1	2015	
C Other				WILLIAMSON COU		
Print Name ROD	Gerz	Signature	RI	nf	Date 11/3/15	
To be completed by Hun	CONTRACTOR OF THE OWNER OW			1		
All applicable accident paper cleared for retirement.	work has be	een received and t	here is no	litigation pend	ing on this unit. It has been	
HR Release Authorization:	101	atour	٤			
To be completed by Bud	get Office	(only for trans	fers):		The state of the s	
Transfer has been reviewed a	nd approve	ed:				
Signature:						

All forms must be routed to the County Auditor's Office once the final authorization and approval have been received.