

# REQUISITION FOR FLEET ARRANGEMENT FORM

Kuwait Finance House  
بيت التمويل الكويتي



## INTERNAL USE ONLY

Please email the complete form to [KFHMB\\_Facilities\\_Management@kfh.com.my](mailto:KFHMB_Facilities_Management@kfh.com.my) 3 days prior to travelling date for fleet arrangement. The fleet arrangement is subject to availability.

**For those who are entitled to car allowance MUST obtained Head of Operations' approval for the usage of the fleet.**

### A. REQUESTOR INFORMATION

NAME	
EID	
POSITION TITLE	
DIVISION / DEPARTMENT	
CONTACT NO.	

### B. TRAVEL DETAILS

Destination	From:	To:
Depart Date		
Return Date		
Time Requested	From:	To:
No. of Day(s)		
Passenger(s) Information	Name	Department / Division
Purpose : <i>(please brief in details or attached any email/approval together with this form)</i>		
Requestor Signature		

### C. APPROVAL

<hr/> Head of Department / Head of Division	<hr/> Head of Operations
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### D. TO BE COMPLETED BY FACILITIES MANAGEMENT DEPARTMENT

Driver Assigned: _____
Processed By FM – Officer : _____ Date : _____