

# STATE FLEET MANAGEMENT

## Instructions for Requesting Lease Fleet Vehicles

Revised: 8/20/2025

State Fleet Management (SFM) wants to assure your vehicle requests are filled as quickly as possible\*. All requests for SFM Leased Vehicles must be measured against the same criteria used for evaluating agency appeals to purchase vehicles.

### There are two primary reasons for requesting Lease Fleet vehicles from SFM:

1. Fleet Additions – the vehicles will serve in a capacity that adds to the quantity of your agency's current fleet.
2. Replacement of Agency-owned Fleet – the vehicles acquired from SFM will replace vehicles one-for-one that are currently owned by your agency or recently disposed from your agency's fleet.
  - o If a state agency: Vehicles currently owned by your agency, which are listed in your request to be replaced, must have its 6-77 submitted to SFM and prepared for turn-in within 30 days before or after the receipt of the Lease Fleet replacement.
  - o If a county/local agency: SFM expects you to follow your county/local government directives for disposing of the fleet you indicated to be replaced.

### Instructions for requesting Lease Fleet vehicles from SFM:

1. Complete the questionnaire in its entirety, as applicable to the reason your agency is requesting fleet from SFM.
  - o Bold font questions are required to be answered whether asking for fleet additions or replacement of agency-owned fleet.
  - o Italicized questions are specific to the reason your agency is requesting fleet.
2. To reduce the chance of SFM requiring further information, answer questions thoroughly (i.e. think about how you would respond to an auditor inquiring about your agency's need for fleet and its utilization).
3. Cut/Copy and paste the questionnaire portion only onto your agency's letterhead.
4. Have your agency director, or his/her authorized designee (as recorded by SFM), sign the completed letterhead request.
5. Email the signed request to: [leasefleet@admin.sc.gov](mailto:leasefleet@admin.sc.gov), [eric.zingmark@admin.sc.gov](mailto:eric.zingmark@admin.sc.gov) and/or [jessica.orso@admin.sc.gov](mailto:jessica.orso@admin.sc.gov).

### Vehicle Class Examples:

The state standard class of vehicle is a compact sedan. All other classes require more stringent justification, particularly when requesting additional fleet. Here are some examples of some of the more common classes:

Vehicle Class	Model Example
Sedan – Compact	Nissan Sentra, Hyundai Elantra, Toyota Corolla
Sedan – Intermediate	Subaru Legacy, Nissan Altima, Chevy Malibu
Minivan – Passenger	Chrysler Voyager, Kia Carnival, Toyota Sienna
Compact Crossover	Chevy Equinox, Ford Escape, Nissan Rogue
Utility – Intermediate	Ford Explorer, Nissan Pathfinder, Dodge Durango
Pickup – ½ ton	Ford F-150, Ram 1500, Chev 1500

*\* SFM does not guarantee a vehicle is available at the moment a request is approved. SFM makes every effort to maintain a well-utilized fleet, with a minimal reserve of vehicles primarily for emergency and/or vehicle substitution needs. All approved requests are processed on a first-come, first-served basis for available, re-issuable used fleet. New vehicles to satisfy requests may be purchased if requests are received prior to the close of each fiscal year's ordering window (varies).*

**Fleet Request Questionnaire** – Please answer all questions in **bold font**. *Italicized font* only as applicable to your agency's request situation.

**1. Is this a request for Fleet Addition or Replacement of Agency-owned vehicles?**

Select One (by marking with X): \_\_\_\_\_ Fleet Addition \_\_\_\_\_ Replacement of Agency-owned

*Respond here for Agency-owned Replacement Only:*

<i>List Tag Number(s) of Vehicle(s) to be replaced (one per row):</i>	<i>Reason(s) for vehicle(s) to be replaced:</i>

**2. If the request is for a fleet addition, what is your agency's intended use for the vehicle(s)?**

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**3. What vehicle class, and quantity of each, is your agency requesting? NOTE: The state standard vehicle is a compact sedan. If your agency is requesting vehicles larger than a compact sedan, additional justification may be required if answers within this form do not clearly justify.**

<u>Vehicle Class:</u>	<u>Quantity:</u>	<u>Vehicle Class:</u>	<u>Quantity:</u>	<u>Vehicle Class:</u>	<u>Quantity:</u>
Sedan - Compact		Van – Cargo ¼ Ton		Bus - ADA	
Sedan - Intermediate		Van – Cargo ¾ Ton		Utility – Intermediate 4x2	
Minivan - Passenger		Pickup – Compact 4x2		Utility – Full Size 4x2	
Comp. Crossover		Pickup – ½ Ton 4x2		Specify Other Vehicle Type & Quantity Below:	
Van – 12 Passenger		Pickup – ¾ Ton 4x2			
Van – 15 Passenger		Bus – Mini School			

**4. What are the estimated annual miles to be driven per requested vehicle, and the initial assigned department / division (department abbreviations are acceptable)?**

Vehicle Class:	Quantity:	Est. Mileage (per vehicle):	Department / Division (and Division Code if known):

**5. What is the anticipated lease duration? NOTE: Vehicles that are ordered to serve specialized needs will require an agreed upon minimum lease term. NOTE 2: Vehicles indicating two months to one year of duration will only be fulfilled by available, re-issuable used fleet.**

Select One (by marking with X): \_\_\_\_\_ Indefinite Lease \_\_\_\_\_ 6 months – 1 year \_\_\_\_\_ 2 months to 6 months

**6. If requesting a vehicle with a passenger capacity greater than seven (7), what is the potential age range of the passengers?**

**7. Special / Additional Equipment:**

- *SFM will only provide special / additional equipment on vehicles as listed as an additional option on a current, applicable-class state contract.*
- *Pre-installed equipment will not be authorized for removal.*
- *Special Use Vehicles, such as box trucks or utility body trucks and their additional equipment needs will be addressed and approved on a case-by-case basis.*
- *SFM will not provide safety equipment outside of the original manufacturer's or vendor's provision, including seat belt extenders.*
- *SFM will not provide police equipment outside of factory-installed spotlights and wiring harnesses.*
- *All other equipment not specified in the statements above are the sole responsibility of the leasing agency to acquire, professionally install, and professionally remove (if purchased by the leasing agency).*

*What additional equipment would you like SFM to consider installing on the vehicle(s)? Which vehicle(s)?*

*NOTE: This will increase the monthly base rate of the requested vehicle(s).*

**8. Provide a statement to certify why your current pool is unable to meet the demand indicated by this request.**

*9. Use the space below to provide any further information that you will believe will be useful in helping SFM approve this request (this question is optional).*

\_\_\_\_\_  
Signature of Agency Director

\_\_\_\_\_  
Date

or

\_\_\_\_\_  
Signature of Authorized Signee (as formally recorded and recognized SFM)

\_\_\_\_\_  
Date