



Special Exemption Request Form for Operation of Electric Utility Vehicles on Curtin Campuses

Name:	
Work Group/Area:	
Date of Application:	
Request details/reason for exemption: (please include how many EUV's and the name of the Curtin responsible person in the area)	
Required Duration of Exemption:	

Please sign to confirm you understand that the Operating Rules identified in the EUV Guidelines must still be followed at all times whilst operating the EUV's	Name:
	Signature:
	Date:
Curtin Area Manager/Supervisor approval	Name:
	Signature:
	Date:
Director Health and Safety approval	Name:
	Signature:
	Date:

Please email your completed form to healthandsafety@curtin.edu.au for approval.