

## SAMPLE VEHICLE USE POLICY “PERSONAL VEHICLES”

### (to be signed at orientation)

DRIVER'S  
INITIALS

- \_\_\_\_\_ 1. The driver of any vehicle used on company business is responsible for its safe, secure and legal operation. The driver is responsible for maintaining the vehicle according to manufacturer's specifications.
- \_\_\_\_\_ 2. Seatbelt use is required for all occupants at all times in vehicles in use for company business.
- \_\_\_\_\_ 3. The use of handheld or hands-free cell phones, or other devices that take attention away from the driving task, are prohibited when driving company vehicles. Employees are prohibited from talking or texting on any cell phone while driving a motor vehicle for business purposes. Employees are required to pull over and stop their vehicle before answering or placing calls. Voice mail should be used to receive calls while driving. This company policy must be followed at all times while driving a motor vehicle for business purposes.
- \_\_\_\_\_ 4. Alcoholic beverages and empty containers are prohibited in any vehicle in use for company business.
- \_\_\_\_\_ 5. Unless required by a specific job assignment or to consume a legitimate meal, vehicles in use for company business are prohibited at establishments that serve alcohol for on premise consumption.
- \_\_\_\_\_ 6. Unless required by a specific job assignment, vehicles in use for company business are prohibited at establishments that sell alcohol for off-premise consumption.
- \_\_\_\_\_ 7. Illegal activities and substances are prohibited at all times in vehicles in use for company business.
- \_\_\_\_\_ 8. Driving a vehicle in use for company business while impaired by alcohol or any drug, whether legal or illegal, is prohibited.
- \_\_\_\_\_ 9. All drivers are required to submit to periodic motor vehicle records checks and are subject to the company's driver disqualification standards.
- \_\_\_\_\_ 10. Drivers who use personal vehicles for company business are required to periodically submit proof of automobile insurance with the minimum limits of liability determined by management.
- \_\_\_\_\_ 11. When driving, I will use caution and drive responsible at all times
- \_\_\_\_\_ 12. When driving, I will continuously look out for pedestrians
- \_\_\_\_\_ 13. When driving, I will not drive aggressive and will leave plenty of stopping distance in front of my vehicle

\_\_\_\_\_ 14. When driving, I will not make any moves that may endanger anyone's safety.

\*\*\* I understand when driving on business that all lives and property are more important than being on time.

DRIVER'S NAME \_\_\_\_\_

DRIVER'S LICENSE NUMBER/STATE \_\_\_\_\_

DRIVER'S SIGNATURE \_\_\_\_\_

DATE \_\_\_\_\_

PLEASE SUBMIT THIS SIGNED AND COMPLETED FORM, ALONG WITH A PHOTOCOPY OF YOUR AUTO INSURANCE DECLARATION PAGE.

Please read the following important disclaimer information concerning the information found on this page:

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