

VEHICLE USE POLICY

I. PURPOSE

The purpose of this policy is to establish guidelines for the use of Agency-owned and privately-owned vehicle use.

II. SCOPE

Only full-time regular employees are permitted to drive Agency-Owned Vehicles (AOV). Temporary staff or interns may be authorized to drive an AOV upon approval by the department head. All full-time, regular employees, temporary staff and interns are authorized to drive their Privately-Owned Vehicle for Agency business, subject to certain requirements provided herein.

III. DEFINITIONS

"Authorized Person" is any full-time, regular employee, temporary staff or intern that is authorized to use an AOV for Agency business.

"Business Use" of an AOV is any use for official Agency business.

"Personal Use" of an AOV is any use that is not for official Agency business, including commuting. Personal Use includes travel between the employee's home and any regular work location.

"Privately-Owned Vehicle" is any vehicle being used for Agency business that is not owned or leased by SVCE.

IV. POLICY

A. GENERAL

While driving an AOV, Authorized Persons are to remember that their actions represent the professionalism of all SVCE employees and are expected to ensure their use of an AOV always leads to a positive perception by the public. In addition, Authorized Persons are not entitled to any expectation of privacy when driving an AOV.

The use of an AOV to commute to and from work is strictly prohibited. Exceptions may be granted by written approval of the CEO.

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Whether using an AOV or Privately-Owned Vehicle for Agency business, employees shall possess a valid California Driver's License of the appropriate classification at all times and shall operate vehicles in accordance with all safety and legal requirements, obey traffic laws and exercise sound judgement. All vehicle occupants are required to wear seat belts. Employees may not consume alcohol or take substances (prescription, non-prescription, recreational, etc.) for a minimum of eight hours prior to using a vehicle for Agency business that would impair their ability to safely operate a vehicle.

An AOV may only be used to transport individuals and equipment directly related to Agency business. SVCE will exercise zero tolerance in cases where the privilege of using an AOV has been abused, with consequences up to and including loss or suspension of privilege, disciplinary action and/or termination. AOVs are considered smoke-free environments.

B. REPORTING OF ACCIDENTS, TRAFFIC VIOLATIONS AND PARKING TICKETS

1. Accidents

In the event of an accident or incident involving an AOV, Authorized Persons are responsible for the following:

- Immediately reporting the accident to the Agency's Insurance Company by calling the number provided on the insurance card in the vehicle glove box;
- Reporting all accidents or losses involving an AOV to their immediate supervisor and the Administration and Finance Department, regardless of fault;
- iii. Submitting a Vehicle Accident/Incident Report Form to their supervisor and the Administration and Finance Department by the next business day; and
- iv. Contacting law enforcement to report all collisions and incidents involving other parties or property, and be responsible for recording file or case numbers on the Vehicle Accident/Incident Report Form.

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2. <u>Traffic Violations/Parking Tickets</u>

Any Authorized Person who receives a traffic citation or parking ticket while operating an AOV while on Agency business must report it to his/her supervisor as soon as possible. Payment of any parking ticket or traffic citation is the responsibility of the driver. The clearing of citations, including fees and penalties, shall be made on the employee's own time.

C. PRIVATELY-OWNED VEHICLE PROCEDURES

1. Employees are discouraged from using Privately-Owned Vehicles to conduct Agency business. However, each employee who has been authorized to use a Privately-Owned Vehicle must complete, sign and submit an Authorization to Use Privately-Owned Vehicles for Agency Business Form to the Chief Executive Officer. The form shall be renewed annually. Annual renewals are to be submitted no later than June 1st of each calendar year.

2. <u>Personal Liability and Insurance Requirements</u> An Authorized Person who is approved to use a PrivatelyOwned Vehicle in the performance of Agency business shall maintain current automobile insurance that complies with the State of California law at all times.

Liability insurance with the operation of a Privately-Owned Vehicle on Agency business is the responsibility of the Authorized Person. SVCE will not be responsible for collision, comprehensive or liability losses for Privately-Owned Vehicles; the mileage reimbursement rate is the full and complete compensation for use of a Privately-Owned Vehicle.

The Chief Executive Officer may reimburse an Authorized Person the amount of their insurance deductible not to exceed \$500 if a Privately-Owned Vehicle is involved in an accident, theft or vandalism while conducting Agency business.

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3. Reporting

When completing the Authorization to Use Privately-Owned Vehicle for Agency Business Form, employees must agree to cooperate fully with the Administration and Finance Department regarding any accident/incident that occurs while using a Privately-Owned Vehicle on Agency business. In the event an accident or incident occurs involving a Privately-Owned Vehicle while conducting Agency business, Authorized Persons are responsible for the following:

- Reporting all accidents or losses involving the vehicles to their immediate supervisor and the Administration and Finance Department, regardless of fault;
- ii. In the event of an accident, or loss, or upon discovering damage to a Privately-Owned Vehicle, submitting a Vehicle Accident/Incident Report Form to their supervisor and the Administration and Finance Department by the next business day; and
- iii. Contacting law enforcement to report all collisions and incidents involving other parties or property, and be responsible for recording file or case numbers on the Vehicle Accident/Incident Report Form.

4. Expense Claims for Mileage Reimbursement

An Authorized Person who drives a Privately-Owned Vehicle in the performance of Agency business will be reimbursed for all Business Use mileage at the prevailing IRS mileage rate upon receipt by the Agency of a timely claim for reimbursement from the Authorized Person.

V. ATTACHMENTS

- 1. Authorization to Use Privately-Owned Vehicle for Agency Business Form
- 2. Vehicle Accident/Incident Report Form

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AUTHORIZATION TO USE PRIVATELY-OWNED VEHICLE FOR AGENCY BUSINESS FORM

In accordance with General and Administrative Policy #2, approval is required to use my privately-owned vehicle to conduct official Agency business.

I hereby certify, that, whenever I drive a privately-owned vehicle on official Agency business, I will have a valid California Driver's License of the appropriate classification and proof of liability insurance in my possession. In addition, all persons in the vehicle will wear safety belts and the vehicle shall always be:

- 1. Adequate for work to be performed.
- 2. Equipped with safety belts in operating condition.
- 3. To the best of my knowledge, in safe mechanical condition as required by law.

I agree to follow the procedures set forth in General and Administrative Policy #2 and will not consume alcohol or take substances (prescription, over-the-counter or recreational) for a minimum of eight hours prior to using a vehicle for Agency business that would impair my ability to safely operate said vehicle.

I understand the mileage rate I claim is full reimbursement for the cost of operating the vehicle, including fuel, maintenance, repairs and both liability and comprehensive insurance.

I further certify that, while using a privately-owned vehicle on official Agency business, all accidents will be reported as soon as possible immediately following the accident. I agree to cooperate fully with the Administration and Finance Department regarding any accident/incident that occurs while using a privately-owned vehicle on Agency business.

CALIFORNIA DRIVER'S LICENS	E NUMBER:						
EXPIRATION DATE:							
EMPLOYEE'S SIGNATURE							
PRINT NAME:	DATE:						

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ACCIDENT/INCIDENT REPORT FORM

1.	Type of Vehicle (Circle): Agency-O	wned Vehicle	Private	ely-Owned Vehicle				
2.	Type of Incident(Circle): Vehicle to Vehicle	Vehicle t	to Object	Vehicle to Pedestrian				
	Other:							
3.	Employee Name:							
4.	Driver License #:							
5.	Date of Incident:	Tir	ne of Incident:	AM PM				
6.	Location of Incident/Cross Street:		C	City:				
7.	# of Passengers at time of Incident:							
8.	3. Weather (Rain/Fog, etc.): Condition of Street (Wet, Dry, etc.):							
9.	Did police respond to scene of incident? Y	'ES NO Police	e Agency/Badç	ge #:				
10.	Was person injured transported to hospital	? YES NO If	yes, what hosp	oital?				
Oth	ner Vehicle Information:							
Driv	ver (Name):							
Driv	ver Address:							
Pho	one #:							
Vel	nicle Make and Model:			-				
Vel	nicle License #:	Driver Lice	nse #:					
Ins	urance Company:	Policy #:		Phone #:	_			
Dos	scribe damage to vehicle or property:							

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