**Driver Responsibility Agreement**

**(Review and obtain signature at least annually)**

**Employee Name: Location:**

At XXXXXXXX, your safety both on and off the job is paramount. Our drivers, the appearance of our vehicles and the manner in which they are operated sends a visible messages to the public about our company, our service, and our concern for public safety.

Motor Vehicle Records **(MVR's)** reflect driving behaviors and help us evaluate driver risk. It is an XXXXXXXX policy and a requirement for employment, that every position, requiring driving, must have a satisfactory **MVR** that complies with company guidelines. If you drive a vehicle for work, it is your responsibility to adhere to company vehicle policies. This company policy applies to drivers of both company owned vehicles as well as employees using personal vehicles in the course of company business.

**EMPLOYMENT QUALIFICATIONS AND ONGOING REQUIREMENTS:**

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I agree that I have met the following criteria related to my driving record:

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1. I have a valid driver's license for the state where I live.
2. I am capable of safely operating the type of motor vehicle to be driven.
3. I have an acceptable driving record (MVR) which conforms to company guidelines.
4. I have an acceptable result on the drug test.
5. I have completed the company driver-training program.
6. I have reviewed and signed the company mobile phone use policy.

An unacceptable driving record includes the following:

* More than (\_\_) moving violations and/or at fault accidents in three years.
* A major conviction including:
	+ Driving under the influence (DUI/DWI) of illegal drugs and/or alcohol.
	+ Refusal to submit to an alcohol or drug test.
	+ Conviction for negligent homicide arising out of the use of a motor vehicle.
	+ Reckless driving or drag racing.
	+ Hit and run, leaving the scene of an accident.
	+ Failure to report an accident.
	+ Operating a motor vehicle without the owner's authority/vehicle theft.
	+ Using a motor vehicle for the commission of a felony
	+ A violation for texting while driving.
	+ Making a false accident report.
	+ Attempting to elude a peace officer.

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**CONTINUED DRIVING STATUS:**

As an employee of XXXXXXXX*, I understand and agree that my employment is conditional upon my complying with the following policies and procedures relating to driving a vehicle for the Company.*

1. **Driving Resulting in Disciplinary Action or Termination:**

The following conditions will result in disciplinary action up to and including termination of employment. Anytime an employee's driving record does not meet company guidelines *a disciplinary action* will be initiated. It is the employee's responsibility to report their violations to their manager:



* If your driving record exceeds our guidelines, *you will be counseled by management and placed on a probationary driving status for \_\_\_\_\_\_\_conditional upon maintaining an acceptable MVR during that period. –OR- you will be suspended until your record is acceptable. –OR- you will be placed in a non-driving position. –OR- etc.*
	+ You will be required to complete a Defensive/Safe Driver course within 30 days of notification.
	+ In cases where you are determined to be unqualified to continue to drive a vehicle for the company *we will consider placing you, if qualified, in another available opening in a non-driving capacity.*
1. An unacceptable driving record (as detailed above) may be grounds for disciplinary action up to and including termination.
2. Failure to immediately notify my manager of any vehicle accident, no matter how minor, will result in *immediate termination.*
3. Failure to immediately report a driver's license suspension/revocation to management may be grounds for disciplinary action up to and including termination.
4. Failure to follow the accident procedures relating to *the Company's Drug Testing Policy may be grounds for disciplinary action up to and including termination. This refers to post-accident drug testing and many companies are not doing post-accident drug tests in which case this should be deleted from your document.*
5. Failure to report to my Manager any driving citation received on or off Company time while driving any vehicle may be grounds for disciplinary action up to and including termination.

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1. Alcohol and illegal drugs are not permitted in a company vehicle at any time. Failure to comply with this provision is grounds for disciplinary action up to and including termination.
2. The following driver infractions, in addition to those listed above, would require disciplinary action as determined by Management:
* Stop sign and traffic signal offense.
* Improper turns, failure to signal, failure to yield.
* Improper backing.
* Knowingly operating a defective vehicle.
* Seat belt violation.
* HOV (High Occupancy Vehicle) violation.
* Driving reports or complaints from the public that are determined to be valid.
* Cell phone use violations based on Company or state requirements.
* Improper or illegal lane change.
* Following to close, weaving in and out of traffic.
* Illegally passing a school bus.
* .
* .

Management reserves the right to make all final decisions with regard to any employee's driving violations or infractions.

1. **Reimbursement Responsibility:**
2. Preventable Accidents:

*If you charge an amount to the employee in the event of a preventable accident, enter those details here.*

1. Maintenance Negligence:

*If you charge for vehicle damage due to maintenance negligence, enter those details here.*

1. Image:

To be responsible for the daily upkeep and cleaning of my Company vehicle including but not limited to, washing, vacuum, checking of fluids, tire pressure, etc. This cleaning is to be done on company property or specified locations.

1. Safety:
2. To operate Company vehicles in a careful and safe manner at all times and to observe all traffic laws and ordinances.

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1. To wear my seat belt whenever driving a vehicle for the Company and to ensure authorized passengers are wearing a seat belt.
2. To operate Company vehicle with my attention focused on my drive and to avoid distractions both in the cab and outside of the vehicle.
3. **Driving A Company Vehicle To From Work:**

*On occasion and for various reasons an employee will**be permitted to park the Company vehicle at his/her residence overnight. The following applies to all such employees:*

1. Under NO circumstances can a Company vehicle be used for any function or purpose other than Company business. NO PERSONAL USE of the Company vehicle will be permitted without specific and documented approval from the *Manager or Senior Manager*.
2. NO PERSON other than an authorized Company employee is permitted to drive or travel in the Company vehicle without specific approval from management.
3. The employee will be responsible for the safety and security of the Company vehicle, equipment and materials during nonworking hours. The Company vehicle must be stored, parked and locked in an area that will prevent the possibility of theft and/or damage to the vehicle and/or injury to others.

**Template**

1. **Motor Vehicle Records:**

I understand that XXXXXXXX will, after my initial employment, periodically request a Motor Vehicle Record check to ensure continued eligibility to drive a vehicle for the Company. I agree that my continued employment is contingent upon complying with all of the policies listed in this Driver Responsibility Agreement, as well as all other vehicle and driving policies.

Employee Signature: Date:

Employee Printed Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_