

Virginia Department of Fire Programs

Vehicle Use Policy

Vehicle Use Policy

1.0 Purpose

The purpose of this policy is to establish policies and procedures governing the use and operations of motor vehicles utilized by Virginia Department of Fire Programs (VDFP) Staff. This will include vehicles owned by the agency, as well as those leased through The Office of Fleet Management Services. These policies may differ slightly in some cases. VDFP must follow policies as set forth in *The Office of Fleet Management Services (OFLS) Policies and Procedures Manual(9/1/2017)*. This document may be accessed at the following address <https://dgs.virginia.gov/globalassets/business-units/fleet/documents/policies-for-ofms-2017.pdf>

2.0 Policy

VDFP will utilize vehicles in the performance of its mission. These duties may include emergency and non-emergency tasks in the performance of their duties. The policy will govern the issue, use, operation and what to do in the event of being involved in an auto accident. The policy will apply to VDFP owned vehicles and vehicles leased through The Office of Fleet Management Services (OFMS), as there are some slight differences due to ownership of the vehicle. OFMS is an organizational unit within the Director's Office of the Department of General Services that establishes fleet management policies and procedures for all vehicles owned by the Commonwealth, to ensure safe, reliable, and cost efficient use.

3.0 Definitions

Agency Transportation Officer (ATO) – Designated individual(s) in each state agency, college, or institution (hereinafter referred to collectively as “agency”) that oversee vehicle management and reporting, and serve as the link for that agency with OFMS

Agency Owned Vehicle - Any state owned vehicle with a title held by the operating agency, that includes but is not limited to sedans, station wagons, minivans, pickup trucks, sport utility vehicles, or vans used primarily for the transportation of the driver and no more than 15 passengers.

Centralized Fleet - Vehicles purchased by the Department of General Services' Office of Fleet Management Services available for use by state agencies on a lease.

Commuting - Use of a state-owned vehicle by an employee for travel between home and official work station, while not in "travel status."

DGS – Commonwealth of VA Department of General Services

DGS Director - The director of the Department of General Services

DOA – Commonwealth of VA Department of Accounts

Employee - Any individual authorized to operate a state-owned vehicle on behalf of the Commonwealth of Virginia, e.g., part-time, hourly, full-time employees, and any individual under contract to perform services.

Law Enforcement Officer - Defined in Section 9.1-101 of the Code of Virginia and/or in accordance with opinions issued by the Attorney General.

Lease - A contract for the use of a motor vehicle from OFMS for a term of more than 30 days.

Office - The facility/official work station where the employee routinely reports for duty.

Office-In-Home - The employee's home is the official location from which he/she begins and ends work duties and the employee does not report on any routine frequency to an official state facility prior to beginning work or at the conclusion of work. The location of the employee's home must be within the geographic confines of the employee's assigned work area.

OFMS Leased Fleet Vehicle - Any state owned vehicle leased by the Department of General Services to a CoVA agency that includes but is not limited to sedans, station wagons, minivans, pickup trucks, sport utility vehicles, or vans used primarily for the transportation of the driver and no more than 15 passengers.

State Fleet Administrator - The Director of the Office of Fleet Management Services.

Travel Status – Travel outside the employee's official station as defined in COV Travel Policy

Vehicle – Any state-owned passenger-type vehicle registered with the Department of Motor Vehicles that includes but is not limited to sedans, station wagons, minivans, pickup trucks, sport utility vehicles, or vans used primarily for the transportation of the driver and no more than 15 passengers.

4.0 Responsibilities

The VDFP Executive Director or designee is responsible for monitoring and enforcing all DGS and OFMS policies and procedures governing the assignment

of, use, maintenance and repair of vehicles that are either agency owned or leased through OFMS. OFMS oversees accident and reporting and citizen inquiries for leased vehicles. The VDFP Executive Director will designate an Agency Transportation Officer (ATO) to serve as a liaison between VDFP and OFMS. The ATO will be responsible for carrying out the day to day duties and responsibilities as assigned to comply with all of the OFMS policies regarding the management and operations of state-owned vehicles.

4.0 Vehicle Acquisition and Disposal

Vehicle acquisition and disposal shall be conducted in accordance with guidelines located in *The Office of Fleet Management Services (OFLS) Policies and Procedures Manual (9/1/2017)*. That document shall be included as an appendix to this policy. OFMS may recall a fleet vehicle if not utilized according to minimum mileage guidelines established.

| Class | Mileage |
|--------------------------|----------------|
| Compact | 8,000 |
| Mid-Size | 8,500 |
| Full-Size | 9,000 |
| Mini-Van | 11,000 |
| SUV - Small | 10,000 |
| SUV - Large | 13,000 |
| Pickup - Compact 4 x 2 | 8,000 |
| Pickup - Compact 4 x 4 | 9,000 |
| Pickup - Full Size 4 x 2 | 10,000 |
| Pickup - Full Size 4 x 4 | 11,000 |

5.0 Assignment of Vehicles to VDFP Staff

A. Assignment:

To insure full and proper utilization of vehicles, OFMS leased fleet vehicles are assigned to an agency and managed by the Agency Transportation Officer in coordination with the agency head. The agency also owns vehicles and the same criteria for assignment will apply. While the needs of a specific employee may be used as justification for an additional assignment of a vehicle, the assigned vehicle is to be under the control of the ATO for use throughout the agency. **The Executive Director or designee may re-evaluate and modify vehicle assignments as they see fit at any time.**

B. Assignment Criteria:

Assignments will be approved only on the basis of one of the following:

1. The vehicle should be driven not less than the annual business mileage (total miles minus commute miles), which is determined in accordance with Chapter 11, Section 2.2-1178 B.1 of the Code of Virginia;
2. A law enforcement officer as defined in Section 9-169 of the Code of Virginia;
3. An employee whose job duties require the constant use or continuous availability of specialized equipment which cannot feasibly or economically be either transferred between OFMS leased fleet vehicles or carried in personal vehicles. Such equipment may include medical supplies, a monitoring or testing apparatus or other supplies, equipment or material necessary to perform the agency's mission or function;
4. An employee, on 24-hour call, who must respond to emergencies on a regular or continuing basis where the emergency response is normally to a location other than the employee's official work station;
5. The vehicle is used for essential travel related to the transportation of clients or wards of the Commonwealth on a routine basis, or for essential administrative functions of the agency for which the use of a temporary assignment or personal mileage reimbursement is neither feasible nor economical.

6.0 Requirements for Vehicle Operation

Any employee operating a state-owned vehicle must have a valid operator's license and have less than six (6) negative points on their driving record. The employee must have completed the Emergency Vehicle Operator's Course (EVOC) Class 1, if the vehicle has emergency lighting on it.

VDFP will use the automated voluntary driving record program offered free to state agencies through The Division of Motor Vehicles. This service monitors employee driving records and notifies VDFP if the employee receives a DUI or reckless driving conviction, or if driving privileges are suspended, revoked, or disqualified. This will ensure VDFP is aware of serious driving violations that use state-owned vehicles and can help reduce the risk of accidents and liability for the Commonwealth.

Employees will be required to report any moving violation that occurs in a state-owned vehicle to their supervisor within 3 business days. Failure to do so may result in disciplinary action and may cause loss of privilege to operate a state-owned vehicle.

7.0 General Use of Vehicles

Drivers shall practice defensive driving by anticipating the actions of other drivers and controlling the vehicle in a manner so as to avoid accidents. The act of

averting the eyes from the roadway may cause the employee to have an accident. Use “best judgment” when changing climate control settings, using the radio, or accessing other settings on the vehicle dashboard. All drivers should perform a walk around of the vehicle prior to moving. Smoking, to include vaporizers and electronic cigarettes, and the use of other tobacco products are prohibited in any state-owned vehicles.

Drivers shall use state-owned vehicles for official business only. Drivers guilty of misuse are subject to disciplinary action by their agency and may lose the privilege to operate state-owned vehicles. Vehicles should be operated in a manner which avoids the appearance of impropriety.

Family members of state employees are prohibited to ride in state-owned vehicles unless the family member’s travel is directly related to state business.

VDFP may permit students, part-time or hourly employees, and volunteers to state service to operate or ride in state-owned vehicles if on official business for the agency. Individuals not employed by the state may accompany state employees operating state-owned vehicles if they have an interest in the purpose of the trip and their presence is directly related to official state business.

Hitchhikers and pets are not allowed in any state-owned vehicles

Cell phones, smart phones, GPS or other electrical devices must be operated via a hands-free device or while the vehicle is in park. Any other use of such as text messaging or emailing is prohibited while the vehicle is in drive and/or in motion. Use of two-radios and related mission essential equipment for emergency response will be permitted providing the operator uses due caution.

Eating food is prohibited in state-owned vehicles.

Each driver is responsible for observing all motor vehicle laws in Virginia. Drivers must not knowingly operate vehicles that do not comply with legal requirements. Any violations and fines, including parking citations, are the responsibility of the assigned driver at the time of such violation. Abuse of motor vehicle laws may result in the loss of the privilege of a state-owned vehicle.

Under no circumstances may a state employee operate a vehicle while under the influence of intoxicating beverages, drugs, or other substances. Convictions of such offenses will result in the loss of the privilege of a state owned vehicle.

Individuals and agencies are responsible for the safe storage and parking vehicles. OFMS leased fleet vehicles should not be left on residential streets or highways overnight unless it’s due to a mechanical failure or emergency or if you have received permission to do so. The driver and/or agency are responsible for any parking fees or towing costs that might be incurred. Drivers should take into

account adverse weather conditions when parking state-owned vehicles (i.e. not parking vehicles in flood prone areas).

Toll charges incurred are the responsibility of the driver and/or agency.

Use of vehicles outside the Commonwealth of Virginia must be coordinated in advance with The Agency Transportation Officer. Consideration should be given to mileage and age of the vehicle for out of state travel. The fleet credit card provided for each vehicle should be accepted out of state, but the driver should verify prior to use. Any state-owned vehicle normally domiciled outside of The Commonwealth of Virginia must be approved by the State Fleet Administrator.

In accordance with DHRM Policy 1.80, no person should possess, brandish or use a weapon that is not required by the individual's position in a state vehicle.

Drivers who operate a state-owned vehicle during adverse weather conditions are cautioned to take extreme care to ensure the safety of driver and passengers.

Seatbelts are required to be utilized by all drivers and passengers in accordance with state law

8.0 Accidents in State-Owned Vehicles

If there is an emergency, call 911.

The driver should also assess if they should move the vehicle off of the highway as a safety precaution or in the event of minor damage to the vehicle

The driver should notify The Vehicle Management Control Center (VMCC) at 1-866-857-6866.

The VMCC will notify Virginia State Police, as all accidents involving state-owned vehicles are required to be investigated by them.

The VMCC will make arrangements for towing of the vehicle if it's not drivable and for transportation of the driver and any passengers to a safe location.

Notify your supervisor and Agency Transportation Officer.

Complete the Automobile Incident Report and submit to VMCC. (Attachment A)

The VMCC will arrange for the vehicle to be estimated by a local body shop once all information is received.

OFMS will make a repair decision on leased vehicles and The Executive Director or designee will make a repair decision on agency owned vehicles.

9.0 Travelling and Commuting

A. Request for State-Owned Vehicles for Commuting:

As specified in the Code of Virginia, Chapter 11, Section 2.2-1179, state-owned vehicles may not be used for commuting unless such use is required with respect to the duties of the employee and approved by the appropriate agency head and, in the case of OFMS leased fleet vehicles, the State Fleet Administrator. Requests for the use of an OFMS leased fleet vehicle for commuting are to be submitted to the Fleet Administrator by the agency on Form OFMS -1. **The Executive Director or designee may re-evaluate, modify or suspend the use of any VDFP owned or leased vehicles that were approved for commuting at any time.**

B. Reporting of Vehicles for Commuting:

Each agency, with the exception of institutions of higher education, must report all state-owned vehicles used for commuting to OFMS annually or as requested by the State Fleet Administrator.

C. Reimbursement from Commuters:

All employees authorized to use a state-owned vehicle for commuting shall reimburse the state for mileage unless they are law enforcement officers or employees who do not report to an official work station and whose office is in their home. Reimbursement shall be by payroll deduction only. The fee for commuting is to be the rate per mile used by the Department of Accounts (DOA) for personal reimbursement when a government vehicle is not available or other rate as approved by DOA.

In accordance with Code of Virginia, Chapter 11, Section 2.2-1179 and Executive Order 89, Special Directive 3 the Secretary of Public Safety may establish a consistent reimbursement rate for those authorized under stated authority.

The payroll deduction amount will remain constant throughout the year unless:

1. The personal reimbursement rate changes.
2. The employee changes the location of his/her residence or office.
3. Unusual circumstances prevail (extended illnesses, etc.)

Procedures for deducting these moneys from employee pay are established by the state comptroller and contained in the Commonwealth Accounting Policies and Procedures Manual.

Types of Home-to-Official Work Station Travel Excluded From These Regulations:

The following are the types of home-to-official work station travel which do not require a request for approval to commute:

1. Employees who only travel between home and official work station when in "travel status" as defined in the "state travel regulations";
 2. Employees who only travel between home and official work station the evening preceding a trip or the morning following a trip.
- D. Pool Vehicle for use by Agency Staff

VDFP maintains a pool vehicle for use. To reserve this, please contact The Agency Transportation Officer to determine availability. If a pool vehicle is unavailable, a rental may be obtained utilizing DGS Guidelines <https://dgs.virginia.gov/fleet/travel-planning/travel-planning--car-rental/> or a personal vehicle may be utilized with the employee completing paperwork for reimbursement of expenses incurred.

10.0 Maintenance of Vehicles

The vehicle maintenance program will be the responsibility of Agency Transportation Officer for VDFP.

Drivers of state-owned vehicles or an individual designated by the agency shall routinely check their vehicles to insure proper oil level, water and antifreeze for radiators, wear on belts and proper inflation of tires. This service should be performed at least weekly and/or at time of fueling. A VDFP Motor Vehicle PM Checklist is attached as Attachment B.

The interior and exterior of the vehicles should be cleaned and cared for as needed to maintain a professional appearance.

It is the responsibility of VDFP to ensure agency owned and OFMS leased fleet vehicles are serviced at recommended intervals. This will be coordinated by The Agency Transportation Officer (ATO) through VMCC.

VDFP staff assigned vehicles are responsible for routine maintenance of their vehicles.

VDFP Staff are not to pay for any service work performed on vehicles, as this is coordinated through VMCC. Emergency repairs should be immediately reported to the ATO (or VMCC) so that the work can be coordinated with a proper vendor. A Virginia Department of Fire Programs Vehicle Maintenance Request will be

completed by the ATO to document work completed on vehicles where no other record exists. This document is included as Attachment C

11.0 Fuel Card

A fleet fuel card is provided with all OFMS leased vehicles or agency owned vehicles. The card may be utilized for fuel (either regular unleaded or E85 is applicable for that vehicle), compressed natural gas/ propane or for a basic car wash (up to ten dollars). Staff utilizing vehicles should retain receipts and submit to The ATO or designee for reconciliation. Use of fuel cards will be monitored for compliance with DGS guidelines. **Misuse of Fuel Cards or not following DGS Policies may subject the employee to disciplinary action up to and including termination.**

Fuel for OFMS leased fleet vehicles is to be obtained from the OFMS facility, a VDOT facility, or a Voyager card accepting commercial station. A directory of VDOT motor vehicle service facilities is located in the glove compartment of each vehicle. The normal hours of operation of these facilities, unless otherwise noted in the directory, is 8:00 a.m. to 4:30 p.m., Monday-Friday. Authorized locations can be found at the following

<https://www.fleetcommanderonline.com/app/public/merchantLocator.do>

Obtain a receipt for each fuel purchase and assure the following information is either printed on the receipt or written on it manually. The date, amount of fuel, the vehicle ID number (license number preceded by a zero) and driver/or who obtained the fuel. Submit to the ATO or designee.

VDFP staff assigned a vehicle will reconcile fuel card statements. The State Fire Marshal's Office will reconcile fuel card statements for their assigned vehicles. The ATO or designee will reconcile any other agency vehicle fuel card statements. All reconciliations will be submitted to The VDFP Finance Office. Assure the fuel card is placed back in a secure and non-visible location in the vehicle. An example fuel receipt is included as Attachment D.

For OFMS leased vehicles in the event of out-of-area emergencies only: parts and labor for towing, road service, and mechanical repairs, if approved at the time of the occurrence. If the vehicle is an Enterprise Rental, you must follow the procedures outlined in the Enterprise rental packet. Enterprise is responsible for any costs associated with those vehicles during roadside emergencies not the Commonwealth. If the vehicle is a permanently assigned vehicle from OFMS, then you must call the VMCC at 1-866-857-6866 for **any** roadside emergency. Failure to do so will result in your agency being responsible for any charges on the fuel card. For agency owned vehicles, please follow the guidelines prescribed by your Agency Transportation Officer.

12.0 Mileage

Mileage for OFMS leased fleet vehicles is collected and reported to OFMS through the fuel card readers at VDOT, OFMS and commercial fueling sites. Drivers **MUST** enter correct odometer readings, no tenths, into the card readers at all VDOT, OFMS and commercial self-service fueling sites. Agencies that have OFMS leased fleet vehicles that do not fuel at VDOT, OFMS or a commercial fueling site must submit a monthly mileage report on Form CP-6 or an Excel spreadsheet. Form CP-6 can be found on the OFMS website at <http://fleet.dgs.virginia.gov/>

13.0 Acknowledgement

All employees will acknowledge they have read and understand the policies for vehicle use of vehicles, either leased or owned by VDFP. Violation of these procedures will subject the employee to progressive discipline which may include the suspension of the privilege of operating state owned vehicles up to termination from employment. All employees will sign a copy of the attached acknowledgment of this policy (Attachment E).

Attachment A – VMCC Automobile Incident Report Page 1

CONFIDENTIAL: CLAIM INVESTIGATIVE MATERIALS

COMMONWEALTH OF VIRGINIA
Automobile Incident Report

Vehicle Pool Number

Agency Dates: Complete this form and email it to DBMClaims@vafire.virginia.gov or send by fax: 804-371-2442
If available, include a copy of the police report
Do not discuss accident with anyone except Commonwealth of Virginia representative and police

| | | | | | | | |
|--|--|--|--|-------------------------------|---------------------------|--------------------------------------|----------|
| Your Agency | Name of agency and institution / division | | | | | State vehicle's license plate number | |
| | Agency address Street / P.O. Box City State Zip code | | | | | Phone number | |
| Time and Place of Accident | Date of accident | Hour | Location | Street or highway | City / County | State | |
| | | A.M. P.M. | | | | | |
| <small>BY THE TERMS OF THE AGENCY'S COVERAGE THE COMMONWEALTH MUST BE GIVEN A REASONABLE OPPORTUNITY TO EXAMINE YOUR AUTO BEFORE REPAIRS ARE MADE.</small> | | | | | | | |
| Your Auto | Make of auto | Year | Body type | Vehicle Identification Number | Police called? | Y N | |
| | Name of owner or leasing company | | | Address Street | City | State | Zip Code |
| | Name of driver | | | Address Street | City | State | Zip Code |
| | Driver's date of birth | Driver's license number | Was license in effect at time of accident? | | | | |
| | Purpose of trip | Who gave permission? | Where were you going when the accident happened? | | | | |
| | | | Where were you coming from when the accident happened? | | | | |
| | Where is the vehicle now? | | | Estimated cost of repairs | | | |
| | | | | | | | |
| | | | | | | | |
| | Other Auto Involved | Make of other auto | Year | Body type | Estimated cost of repairs | | |
| Describe damage to other auto | | | | | | | |
| Name of other driver | | | Address Street | City | State | Zip Code | |
| Name of other auto's owner | | | Address Street | City | State | Zip Code | |
| Is other auto insured? | | Name of other auto's insurance company | | | | | |
| Passengers | Names of passengers in your auto | | Address Street | City | State | Zip Code | |
| | | | | | | | |
| | Names of passengers in other auto | | Address Street | City | State | Zip Code | |
| | | | | | | | |
| Injuries (No matter how minor) | Names of persons injured | | Address | Injuries | Age | | |
| | | | | | | | |
| | | | | | | | |
| | In which auto were the injured riding? | | | | | | |
| Name of doctor / hospital | | | Address Street | City | State | Zip Code | |

NEITHER SUBMITTED NOR ACCEPTED AS NOTICE IN SATISFACTION OF ANY FILING REQUIREMENTS

Attachment A – VMCC Automobile Incident Report Page 2

CONFIDENTIAL: CLAIM INVESTIGATIVE MATERIALS

| | | | | | | | | |
|--|---|-------------------------------|---|---------------------------------|---|------------------|-------------------------------------|--|
| Property damage Other than Auto | Name of owner | | Address | | Street | City | State | Zip Code |
| | Kind of property | | | | | | | |
| Auto | Estimated cost of repair | | Where may property be seen? | | | | | |
| | | | | | | | | |
| Witnesses | Name / phone numbers | | Address | | Street | City | State | Zip Code |
| | | | | | | | | |
| Description of Accident | On what street were you driving? | | Direction | Speed | Street or road other auto was driving on | | Direction | Speed |
| | Were your lights on? | | Were the other auto's lights on? | | Traffic controls in place? | | For whom? | Speed limit |
| | Y <input type="checkbox"/> N <input type="checkbox"/> | | Y <input type="checkbox"/> N <input type="checkbox"/> | | Y <input type="checkbox"/> N <input type="checkbox"/> | | | |
| | Did a other driver give signal of a kind? | | Time and date who entered first? | | Who had right of way? | | | |
| | Y <input type="checkbox"/> N <input type="checkbox"/> | | | | | | | |
| | Describe how the accident happened. Include any special details of the collision. Attach additional sheets if needed. | | | | | | | |
| | Show on the diagram the position of all autos, persons, traffic controls (stop light, stop signs, etc.) and other objects. Show street names. | | | | | | | |
| | | | | | | | | |
| | Type of glass: | | Tinted <input type="checkbox"/> | Safety <input type="checkbox"/> | Type of break | | Cracked <input type="checkbox"/> | Chipped or pitted <input type="checkbox"/> |
| | | | Clear <input type="checkbox"/> | Plate <input type="checkbox"/> | Shattered <input type="checkbox"/> | | Bull's eye <input type="checkbox"/> | Half moon <input type="checkbox"/> |
| Location of breakage | | Went <input type="checkbox"/> | Rear <input type="checkbox"/> | Door <input type="checkbox"/> | | Other (describe) | | |
| Windshield damage: check "Type of glass" and "Type of break", above, and mark location on diagram | | | | | | | | |
| Your Auto's Glass Breakage | | | | | | | | |
| Do you think a claim will be made against you? | | By whom? | | | | | | |
| Y <input type="checkbox"/> N <input type="checkbox"/> | | | | | | | | |
| Whose your supervisor? | | Your signature | | | | | | |
| Your supervisor's phone number | | Date | | | | | | |
| What is your title / position? | | Your email address | | | | | | |
| Your phone number | | | | | | | | |
| NOTE: When submitting this form electronically, your initials below will serve as your electronic signature. | | | | | | | | |
| Reported to (Name) | Initials | Reported by (Name) | Initials | Date reported | | | | |

NEITHER SUBMITTED NOR ACCEPTED AS NOTICE IN SATISFACTION OF ANY FILING REQUIREMENTS

Attachment B - VDFP Motor Vehicle PM Checklist



Commonwealth of Virginia
VIRGINIA DEPARTMENT OF FIRE PROGRAMS
1027 Technology Park Drive
Glenn Allen, VA 23060-4900

MOTOR VEHICLE WEEKLY SAFETY CHECKLIST

Department: _____

Vehicle Make: _____ Model: _____ V.I.N.# _____

| Do not operate any vehicle if an unsafe condition exists. | Inspection Date: | Inspection Date: | Inspection Date: | Inspection Date: | Inspection Date: |
|---|------------------|------------------|------------------|------------------|------------------|
| | / / | / / | / / | / / | / / |
| | Inspected By: | Inspected By: | Inspected By: | Inspected By: | Inspected By: |
| Windshield wipers and washers | | | | | |
| Directional Signals | | | | | |
| Lights | | | | | |
| Horn and Mirrors | | | | | |
| Inspection sticker current | | | | | |
| Tag current | | | | | |
| Check for 1000 mile maintenance | | | | | |
| Tire inflation and safe tread depth | | | | | |
| Power steering fluid | | | | | |
| Antifreeze / Coolant | | | | | |
| Motor oil level | | | | | |
| Brake fluid & Brake operation | | | | | |
| Exterior and Interior condition acceptable | | | | | |
| Transmission Fluid & Hydraulics (if applic.) | | | | | |

Any item not passing inspection shall immediately be brought to the attention of the department head, a garage work order issued, and the vehicle repaired and returned to service as soon as possible.

Comments: _____

Attachment C - Virginia Department of Fire Programs
Vehicle Maintenance Request

Virginia Department of Fire Programs
Vehicle Maintenance Request

| Logistics | | | |
|-----------------------------------|--|------------------------|--|
| Date | | Region | |
| Vehicle Number | | Requested By | |
| Description of Need | | | |
| DGS Pool Number | | Current Mileage | |
| Vendor Name & Location | | | |
| Point of Contact | | Phone Number | |
| Additional Comments | | | |

Attachment D – Example Fuel Receipt

Example Fuel Receipt

G-1K-17
J Charge
F256 054 289

Uawa 88687
10073 Sliding Hill R
Ashland VA 23006

6/12/2017 3:28:53 PM
Term: JB510150/8001
Appr: 778763
Seq#: 001634

Product: Unleaded
Pump Gallons Price
46 18.939 \$2.099
Total Sale \$99.15
Uoyager
Capture
XXXXXXXXXXXXXXXXX7068

Odometer : 91165

06/12/2017 15:17:52

I agree to pay the
above Total Amount
according to Card
Issuer Agreement.

* YOUR OPINION *
* MATTERS! *
Tell us about your
* experience at *
* MyUawaVisit.com *
* We'll thank you *
* with a FREE *
* Hot Beverage or *
* Fountain Soda *
* Dispenible *
* en Espanol *

Survey Code: 130439/
Store Number: 00607

Please respond
within 5 days

Attachment E – Acknowledgement of Policy

Virginia Department of Fire Programs
VDFP Vehicle Use Policy,
Office of Fleet Management Services
Policies and Procedures Manual
State Agency Vehicle Acknowledgement Form
CERTIFICATE OF RECEIPT

I have been provided a copy of two manuals pertaining to the use and operation of state owned vehicles:

1. Virginia Department of Fire Programs Vehicle Use Policy
2. Department of General Services, "Office of Fleet Management Services" Policies and Procedures Manual

I understand that it is my responsibility to read and abide by these policies. If I have any questions about the policy, I understand that I need to ask my supervisor or the Agency Transportation Officer for clarification.

In addition, I understand that there may be additional requirements of the Virginia Department of Fire Programs that will be communicated to me related to assigned vehicle restrictions, emergency vehicle operations usage and commuter fees if applicable.

| |
|--------------------------------|
| Employee Number: |
| Signature: |
| Date: |
| Supervisor Name and Signature: |