ACKNOWLEDGMENT OF RESPONSIBILITY FOR MOTOR POOL OPERATIONS

I,		, hav	re read the Motor Pool Policy and Procedures Manual and understand	
fully tha	(please print legibly) at upon release of a county vehic	le to me, I assume the following	g responsibilities:	
1.	To have in my possession at all times a <u>valid</u> Driver's license that covers the type of vehicle I will be operating.			
2.				
3.	To observe commonly accepted rules of courtesy toward pedestrians and other drivers.			
4.	To familiarize myself with and	niliarize myself with and abide by published "Berkeley County Motor Pool Policies and Procedures".		
5.	To report all accidents/property damage as defined by policies and guidelines (located in vehicle glove compartment) established by the Risk Management Office.			
6.	To perform an exterior/interior vehicle inspection to include checking all lights, brakes, windshield wipers and to insure that the vehicle registration, accident reporting guidelines and the insurance cards are in the glove compartment and other items as defined in the Travel Log Form.			
7.	To report all mechanical, physical, or other problems on the Motor Pool Travel Log Form.			
8.	To legally satisfy any traffic citations issued where the Motor Pool vehicle is involved, whether for standing or moving violations.			
9.	. To properly care for the vehicle while it is in my custody and to lock the vehicle at all times while unoccupied.			
10.). To pay any traffic or parking fines incurred by me.			
11.	1. To insure that I, and all occupants of the vehicle under my operation, wear a seatbelt at all times while the vehicle is in operations.			
12.	12. To limit use of cell phone while vehicle is in operation (use "hands-free" system when available). NO TEXTING .			
13.	13. To insure there's No Smoking in vehicle at all times.			
14.	To permit only County employ	ees or other persons on official	County business to be transported in the vehicle.	
Signatur	re of Operator		Director Signature	
Phone			Director Name (Print)	
Date			Date	
Driver's	s License Expiration Date		Department Name	

It is the responsibility of the Department Director to verify the current status of the above employee's eligibility (including a valid driver's license) to drive a County Motor Pool vehicle.

Department Number