



AUTHORIZATION TO USE PRIVATELY-OWNED VEHICLES ON CSUDH TORO AUXILIARY PARTNERS BUSINESS

In accordance with both Toro Auxiliary Partners and CSURMA AORMA policy, approval is requested to use privately owned vehicles to conduct official Toro Auxiliary Partners business.

I hereby certify that, whenever I drive a privately owned vehicle on TAP business, I will have a valid driver's license and proof of liability insurance in my possession, all persons in the vehicle will wear safety belts, and the vehicle shall always be:

- Covered by liability insurance for the minimum amount prescribed by State law (\$15,000 for personal injury to, or death of one person; \$30,000 for injury to, or death of two or more persons in one accident; \$5,000 property damage). Vehicle Code Section 16020 (effective July 1, 1985) requires all motorists to carry evidence of current automobile liability insurance on their vehicle.
- Adequate for the work to be performed.
- Equipped with safety belts in operating condition.
- To the best of my knowledge, in safe mechanical condition as required by law.

I understand that 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 TAP business, all accidents will be reported within 48 hours. I understand that permission to drive a privately owned vehicle on TAP business is a privilege which may be suspended or revoked at any time.

EMPLOYEE INFORMATION

_____	_____	_____
Name (print)	Signature	Date
_____	_____	_____
Driver's License Number	State of Issuance	Expiration Date

SUPERVISOR APPROVAL

_____	_____	_____
Name (print)	Signature	Date

Account Number (TAP Account to charge for DMV Pull Program (\$5.00) plus an annual cost of \$1.00).

RENEWAL

I have reviewed the above certification and approval and certify that the information provided is correct and valid.

_____	_____	_____
Employee's Signature	Approving Authority Signature	Date

I have reviewed the above certification and approval and certify that the information provided is correct and valid.

_____	_____	_____
Employee's Signature	Approving Authority Signature	Date

This authorization is valid for one year from the date of approval indicated above. In order to continue driving on TAP business after the authorization expires, the employee must complete the renewal section, and resubmit to HR and be current with all required trainings.