

# VEHICLE USE POLICY AND VEHICLE USE AGREEMENT FORM



October 2023

This document provides the vehicle use policy and vehicle use agreement form for Project Healing Waters Fly Fishing, Inc. This policy applies to all PHW volunteers, participants, and employees.

## VEHICLE USE POLICY

The Vehicle Use Policy and Vehicle Use Agreement Form represents our organizational vehicle use policies and procedures. PWH restricts vehicle use to PHW registered volunteers and to our employees. Participants or any unregistered volunteers may not operate any PWH vehicle at any time. Prior to using any PWH vehicle, volunteers must complete the attached form and submit it to Project Healing Waters for approval along with a copy of the front and back of the volunteer's driver's license. PWH will retain these documents on file for insurance purposes. The CEO retains the authority to regularly review and update it within the powers inherent and delegated to the position as the organization's Chief Executive Officer. Violations of the Vehicle Use Policy and Vehicle Use Agreement may result in dismissal from the organization as well as personal liability for any damages to the vehicle or for any injuries to its passengers.

## VEHICLE USER INFORMATION

Name		Phone	
Address			
Email			
PHW Region			
PHW Program			

## VEHICLE INFORMATION

Make, Model, Year	
Vehicle Identification Number (VIN)	
Address where vehicle will be kept	

**COPY OF USER'S DRIVER LICENSES - FRONT AND BACK**



**VEHICLE USE AGREEMENT**

1. I received a hard copy of the vehicle owner’s manual and insurance card. I will ensure that these documents remain with the vehicle at all times.
2. I agree to maintain the vehicle according to the recommended maintenance service.
3. I agree that I will only transport registered PHW volunteers, participants, or staff for approved PHW activities in to support the organization’s mission.
4. I will only allow registered PWH volunteers, participants, or staff to enter the vehicle.
5. I will only allow registered and authorized PHW volunteers to drive the vehicle.
6. I will not drive the PHW vehicle while consuming alcoholic beverages or other drugs or while under the influence of alcohol or other drugs, nor will I allow anyone else to do so.
7. I will obey all traffic laws, ordinances, and regulations pertaining to the operation of motor vehicles.
8. I will pay any fines, parking tickets, or other assessments for violations of traffic laws, ordinances, or regulations imposed on me. I acknowledge fines paid by me for any violations of such motor vehicle laws, ordinances, or regulations are totally my responsibility and will not be reimbursed by PHW.
9. I will wear a seat belt at all times and I will require all passengers to do so as well.
10. Prior to driving the vehicle, I will check tires, lights, wipers, horn, turn signals, rear view mirrors, and brakes to be sure they appear to be in safe operating condition. If defects are noted, I will promptly report and/or have them repaired as appropriate.
11. I agree to return the vehicle in the same condition as prior use or I will pay to restore it to that condition.
12. In the event of an accident, I will promptly notify the Director of Logistics and Field Support and/or VP of Operations and comply with the accident reporting procedures.
13. I understand that PHW prohibits using the vehicle for personal tasks, errands, or other purposes not directly related to our mission.
14. I will return the vehicle before I sever my employment or volunteer status with PHW.
15. I understand the PHW CEO or their designee(s) reserve the right to redirect the use of or repossess the vehicle at any time.

By signing below I attest that my personal information is accurate; I understand that PHW will issue the PHW owned vehicle identified in this agreement to me for use during approved PHW activities only; and that I read; I understand; and I will abide by this Vehicle Use Agreement

Name & Signature

Date

By signing below I authorize this vehicle to be used for official PHWFF use as describe in this Vehicle Use Agreement.

Approval Name & Signature

Date

**Send completed form to: [travel@projecthealingwaters.org](mailto:travel@projecthealingwaters.org)**