## AUTHORIZATION TO USE PRIVATELY OWNED VEHICLE FOR NSHE BUSINESS

In accordance with the NSHE Business Center South and the Risk Management and Safety Vehicle Use Program, a signed certification is required to use a privately owned vehicle to conduct official NSHE business.

I hereby certify that:

- 1. Whenever a privately owned vehicle is used for NSHE business, I will have in my possession a valid driver's license and current proof of liability insurance.
- 2. The vehicle is covered by liability insurance for the minimum required by state law:
  - 2a. Bodily Injury Liability \$25,000.00 per person / \$50,000.00 per accident\*
  - 2b. Property Damage Liability \$20,000.00 / Current minimums for Nevada\*
- 3. I do not have any outstanding traffic tickets or traffic warrants.
- 4. The vehicle is equipped with safety belts/restraints and are in good working condition.
- 5. All vehicle occupants will wear seat belts/safety restraints when inside the vehicle.
- 6. The vehicle is adequate for the work or task being performed.
- 7. The vehicle is in safe mechanical condition to the best of my knowledge.
- 8. I understand that any mileage rate claim is full reimbursement for the cost of operating the vehicle, including fuel, maintenance, repairs, and any insurance.
- 9. Authorization for this purpose is a privilege and may be suspended or revoked an any time.

## \* Please complete all the fields below.

Driver / Vehicle Owner Information

Full Name:	Job Title:	_
Driver's License number:	State where license was issued:	
Department:	Email:	
Driver Signature:	Date:	
Supervisor Signature:	Date:	

\*\* THIS FORM GOVERNS THE SAFE AND RESPONSIBLE USE OF VEHICLES WHEN USED BY YOUR DEPARTMENT, FOR OFFICIAL UNIVERSITY BUSINESS. PLEASE PRINT, COMPLETE, AND FORWARD THE FORM TO YOUR SUPERVISOR TO COMPLETE THE APPROVAL PROCESS. YOUR DEPARTMENT SHOULD MAINTAIN THESE FORMS FOR RECORD KEEPING PURPOSES. RMS DOES NOT KEEP ARCHIVED COPIES OF THIS FORM.