

## REQUEST TO USE A UNIVERSITY MOTORIZED VEHICLE

### SECTION A: (VEHICLE USE AND AUTHORIZATION DETAILS)

\_\_\_\_\_, Driver's Name required to use a University Vehicle(s)

PRINT FULL NAME

#### Purpose for vehicle use:

#### Area(s) / Territory of Operation: *(List specific regions within BC and outside of BC)*

**\*Reminder** – if the vehicle is to be **used outside of Prince George** for more than **thirty (30) days** contact the Safety Department a minimum of three (3) days prior to the trip to have the insurance policy changed.

#### Duration of Use:

**\*UNBC Personnel:** Authorization is for a maximum of **three (3) years or until expiry of Driver's License**, whichever comes first.

**\*Personnel:** Vehicle Custodian: Person identified with Safety with having authority to assign use of the vehicle and overall vehicle safety, maintenance, and insurance.

UNBC Staff: UNBC Faculty or Employee other than the Vehicle Custodian

**Students or Other:** Authorization for permission to use a vehicle **cannot exceed the fiscal year end (March 31<sup>st</sup>)** or until expiry of the Driver's License, whichever comes first.

**TERM:** *(as outlined above)*    \_\_\_\_ / \_\_\_\_ / \_\_\_\_    to    \_\_\_\_ / \_\_\_\_ / \_\_\_\_  
    mm    dd    year     mm    dd    year

#### Vehicle Description(s): *Attach separate list if more vehicles need to be identified.*

Plate #	Vehicle Description including Serial Number	Licensing Requirement <small>(other than standard Class 5)</small>	*Vehicle Custodian & Program
			Print Name & Program:  Authorized Signature:
			Print Name & Program:  Authorized Signature:
			Print Name & Program:  Authorized Signature:

### SECTION B: (DRIVER DETAILS)

Driver's Name _____	Cell # _____
Position _____	Employee/Student # _____
Address _____	Driver's License # _____
Postal Code _____	Driver's License Class _____
UNBC Phone # _____	UNBC Email Address _____

**SECTION C: (STATEMENT OF RESPONSIBILITY - FOR DRIVER TO COMPLETE)**

Drivers of University vehicles should be aware that vehicle accidents, regardless of being reported to the RCMP, may involve ICBC. The implication of this is that the driver's personal driving record and/or personal vehicle insurance premiums may be affected. The University takes no responsibility for imposed charges, infractions, or penalties resulting from an accident involving a University vehicle. **THE DRIVER WILL BE PERSONALLY RESPONSIBLE FOR ALL CHARGES, INFRACTIONS, OR PENALTIES**

I (the driver) \_\_\_\_\_ hereby agree that I am responsible for the following:

(Read and initial each section)

	<ul style="list-style-type: none"> <li>• <b>Attach a Photocopy of the FRONT and BACK of your driver's license.</b></li> </ul>
	<ul style="list-style-type: none"> <li>• I will ensure that my driver's license is valid and I adhere to all restrictions on my license.</li> </ul>
	<ul style="list-style-type: none"> <li>• I will ensure that the class of vehicle being driven is permitted under my driver's license.</li> </ul>
	<ul style="list-style-type: none"> <li>• I will immediately inform my supervisor and UNBC Safety Office if my license is suspended or revoked.</li> </ul>
	<ul style="list-style-type: none"> <li>• I understand that UNBC vehicle(s) will be used for UNBC business ONLY.</li> </ul>
	<ul style="list-style-type: none"> <li>• I will ensure the safe operation of the vehicle(s) at all times.</li> </ul>
	<ul style="list-style-type: none"> <li>• I will observe all traffic and motor vehicle regulations.</li> </ul>
	<ul style="list-style-type: none"> <li>• At no time will I use a cellphone, operate a computer, or any other similar electronic device while the vehicle is in motion.</li> </ul>
	<ul style="list-style-type: none"> <li>• Additional passengers must be employees, students on UNBC business, or official guests of UNBC.</li> </ul>
	<ul style="list-style-type: none"> <li>• I will ensure that ALL passengers permitted to travel in a UNBC vehicle will do so only providing that each have a designated seat which includes manufacturer issued seat restraints. Restraints are to be used by all passengers including the driver.</li> </ul>
	<ul style="list-style-type: none"> <li>• I will complete logbook entries to record destination, distance driven, and any other details required by my supervisor.</li> </ul>
	<p><b>In the event of an Accident you agree to:</b></p> <p><b><u>At the scene of the accident:</u></b></p> <ul style="list-style-type: none"> <li>• Call 911 If anyone is injured.</li> <li>• If safe to do so, and after photos are taken, move the vehicle(s) off the road and out of the way of traffic.</li> <li>• If other vehicle(s) are involved – (obtain from each driver): Name, Driver's License, Address, Contact Number, Plate Number, Description of Vehicle (make &amp; model).</li> <li>• Obtain contact information from any witnesses.</li> <li>• Take photos of the scene including skid marks, debris, and vehicle damage if safe to do so.</li> <li>• Record details of how or why the accident occurred, noting the direction of travel prior to accident, and resting location of each vehicle after.</li> </ul> <p><b><u>Within 24 hours of the incident:</u></b></p> <ul style="list-style-type: none"> <li>• Contact supervisor and the Safety office within 24 hours of the accident. Complete an incident form with supervisor which will be submitted to the Safety office. Provide assistance as required for the processing of a claim.</li> </ul>

Drivers Signature: \_\_\_\_\_

Date: \_\_\_\_\_

**SECTION D: (STATEMENT OF SUPERVISOR RESPONSIBILITIES AND AUTHORIZATION)**

I AM A PRINCIPAL INVESTIGATOR – (SUPERVISOR STATEMENT NOT APPLICABLE)

I AM A SUPERVISOR / VEHICLE CUSTODIAN and agree to the following terms:

**Custodian / Supervisor Responsibilities:**

- Supervisors are responsible for monitoring personnel they supervise for the safe use of University Motorized Vehicles in accordance with Section 217.1 of the Criminal Code and Div 3, Section 117 of the Workers Compensation Act.
- Custodians and/or Supervisors must monitor, arrange, and maintain vehicle maintenance records to ensure the vehicle(s) is operating safely and in accordance to requirements under the Motor Vehicle Act.
- Supervisors are responsible for ensuring that all incidents and authorization changes are reported to Risk & Safety Management and for participating in incident investigations.

Approved By \_\_\_\_\_  
Print Name and Position (Dept Head, Researcher, Thesis Supervisor)

Signature \_\_\_\_\_

Date \_\_\_\_\_

**INSTRUCTIONS:** Complete form, attach a photocopy of the FRONT and BACK of your driver's license and send to the Risk & Safety Department via Email to [safety@unbc.ca](mailto:safety@unbc.ca) or via interoffice mail. Retain a copy for your department records.