

Health Care (Auto) Liability Risk Management Manual

Prepared By:



805 East Broward Boulevard
Suite 303
Fort Lauderdale, Florida 33019

800 716 9948 (P)
800 915 3922 (F)

www.sabalinsurance.com

Introduction

Date: October, 2007
From: Ian Norris, CIC
Subject: Automobile (Insurance) Issues – HHA's and Affiliated Health Care Firms

Some background: over the past fifteen years, I've been fortunate to have had the opportunity to work with many healthcare firms. Today, our agency handles the corporate insurance for hundreds of healthcare clients across the United States, spanning the entire industry spectrum (home health, hospice, nursing pools, etc).

Over this time, we have noticed that most of the coverage questions that we field – from phone calls, emails, and discussions at trade shows – concern auto-related inquiries. Simply stated, people want to know “what happens when my employee/contractor/volunteer is involved in a car accident? Who's liable for the damages?”

This is a confusing issue and it seems that much of this confusion stems from a few factors. One is that each insurance company uses different policy language and coverage interpretation(s) in treating auto exposures. So there is no 'industry standard' when it comes to claims. It is also murky when considering that there are multiple potential payor sources in an accident (e.g., workers' compensation, auto coverage, etc.) depending on who is injured and how they were injured. So it's easy to see how an insured could be unclear about the application of coverage relative to auto insurance for an agency/hospice or registry.

Rather than just send out some forms and leave it up to you to decide how things work, we figured that we would take this opportunity to *comprehensively* address the auto issue – as best as we could – based on our firm's cumulative experience on the subject.

A disclaimer: the principal writers of this document are not attorneys, claims adjusters for an insurance company, or underwriters. Our 'qualifications' are centered on the fact that our agency has dealt with the auto coverage issue among thousands of insureds, more than two dozen insurance companies, and multiple auto claims, some very serious. So I believe that our perspective on auto insurance issues is the most appropriate (and practical) *for you...the healthcare insured.*

This coverage memorandum is designed to:

- 1.) Try to 'demystify' auto coverage for healthcare firms and explain what is covered, and in what instances;
- 2.) Offer some common-sense suggestions on how you might better protect yourself in the hiring/screening process and how this may later assist you in the event of an auto claim;
- 3.) Give you some helpful tips on managing the auto exposures of your firm on a day-to-day basis.

For the purposes of this coverage memorandum, the focus is on **hired and nonowned auto coverage (hereinafter, 'HNO')**. Simply put, this is the liability that your business has when people are driving on your behalf.

A brief overview of hired and nonowned auto liability is below (we have used 'employee' and 'agency' in the examples contained in this document simply in the desire to be consistent.) Coverage works the same for agencies (private/certified) and hospices (with possible exception of volunteers in the latter.) Coverage may be construed differently for independent contractors – see further in this document).

HNO covers bodily injury and property damage caused by a vehicle you hire (including rented or borrowed vehicles) or by a vehicle which is non-owned (meaning vehicles owned by others – such as patients, referral sources, marketers, and including vehicles owned by your employees). If your firm owns an auto, HNO can be included on your business auto policy (as symbols '8' and '9'). If no auto is titled in the business name, HNO coverage is typically added as an endorsement on a general liability policy. Some insurance companies use a special HNO 'sub limit' (meaning a special, separate limit that is often a lower amount than your general liability limits) for HNO.

For purposes of establishing liability, the vehicle in question must be used in the conduct of your business (e.g., driving a patient to an appointment, having an employee run an errand, renting a car on a business trip, etc.).

HNO will not usually pay for physical damage to the vehicle itself; that is covered by the owner's insurance, although this option is sometimes available. If the HNO is provided under your business auto policy, then the physical damage is covered under the same policy providing HNO. HNO will pay for property damages to the other party (e.g., the other driver, property owner) in an at-fault accident.

For bodily injury, there are multiple sources of coverage (workers' compensation, auto liability, HNO/general liability, PIP) that could apply to the various parties to the accident – e.g., agency employee, the patient, the other driver, the other drivers' passengers, any bystanders/pedestrians involved. HNO will generally respond to bodily injury payments for parties other than your employee. Its application may vary if the agency's driver is a contractor.

HNO coverage responds on behalf of the named insured (your agency) if there is an auto accident and you are deemed responsible and/or are sued. Your HNO policy may respond on your agency's behalf if you are sued even if you/your agency's driver is not at fault in the incident. If no other insurance exists (the employee is 'bare' or the patient who owns the car that your employee is driving is 'bare') your agency can still be sued and your policy would respond and defend you.

In the event of a claim – especially an at-fault accident in which your employee (driver) causes bodily injury or property damage – the employee's auto insurance policy will generally respond first to the incident. In the event of an award (settlement, jury trial), the primary policy limits – of the employee or the patient - will be 'first in line' to pay on the damages. This scenario also contemplates your employee (driver) driving a patient's vehicle. If the employee is in the patient's car and has an at-fault accident, the vehicle's owner (who authorized the use of the vehicle) could have their insurance policy as the primary ('first in line') payor for the claim.

Your agency's HNO policy will pay when the primary limits of the employee or the patient (vehicle owner) are exhausted. Your agency's HNO policy may already be involved in the claim (defending you/your agency) even if there is another policy (the employee/the car owner) that is primary.

This is a basic overview and does not include extensive examination of the all of the variations which can actually happen in the event of a claim.

Should you have an employee involved in an accident on company business – or if you (as agency principal or administrator or manager) are involved in an accident while on company business – the agency is a target because a plaintiff's attorney will know that the 'deep pockets' usually reside with the agency's insurance policy versus the employee's or the patient's (car owner's) policy. This 'deep pocket' factor can also lead to instances in which the agency is brought into an auto claim situation even when the connection between the agency and the incident is tenuous, at best (e.g., an aide is involved in an auto accident while ten miles away from where she should be according to her work schedule; or an aide is running a personal errand between visits.)

This scenario is a bit cloudier in the contractor/registry model (in our opinion.) While the 1099/registry model makes use of extensive waivers in which contractors acknowledge their status, there is still an exposure (again, in *our opinion*), for the *firm* (registry/nursing pool) to be brought into a claim. Even if the contractor acknowledgement holds up in court (and any defense attorney will advise that there are no guarantees in a jury trial,) the firm itself could still incur significant expense in defending itself in an HNO action. As a result of this, we include HNO coverage for our insureds using the registry/contractor model and we counsel that they perform background checks on auto history as part of their due diligence for contract hires.

Conclusion

While there are risks associated with the use of autos in your agency, the use of vehicles by employees and the driving of patients are near-unavoidable in home care/hospice. As many of our clients have stated (when debating the use of autos in their businesses), "*if [my] agency does not provide a means of transportation to the patient, someone else's will...*"

With that in mind, know that this memorandum is meant to *inform* and *educate*. Too often, insurance carriers – and their attorneys – want to 'engineer' insurance policies and the application of risk management so that the insured can't do *anything*. Our agency stresses a practical approach to managing risk. And we understand the realities of running a healthcare firm. So our methodology of risk management is built around incorporating risk control and risk mitigation protocols within the things which you are already doing in running your company and screening your employees (i.e., making them a part of job applications, annual reviews, QA procedures, etc.)

The *good news* is that we believe – based on our experience with auto policies, with healthcare firms, and with auto claims – that you can significantly reduce your HNO and driving risk profiles (both pre-claim and post-claim) by implementing these simple, practical risk management protocols.

We've provided a 'kit' for you – including forms for use in your screening/hiring/evaluation process – as well as forms for use by yourself or your management and risk management tips that you might find useful in the operation of your company. Based on our knowledge of the insurance industry – and how claims are handled – we believe that these protocols can help you and your agency mitigate the potential damage(s) of a serious auto liability loss either via preventive management ('pre-loss') or via the establishment of a solid defense strategy ('post-loss').

We hope you find this information useful and you can feel free to contact us at **954 828 9948** or **800 716 9948** with any questions or concerns.

Manager's Memorandum

From: Ian Norris, CIC
 To: All Management Personnel
 Subject: Auto Insurance – Risk Management Protocol

At the end of this document, you will find in - order - the risk management protocol prepared for your firm by Sabal Insurance Group, Inc. The attachments to this memorandum may be used by you/your firm to try to mitigate the risk of employee/contractor driving on company business.

At the end of this memorandum are some additional 'tips' relative to risk management specific to auto exposures.

[Please note: most of the forms contained herein are drafted for *W-2 employees* of agencies and/or hospices]

You will find, in order, the following:

1.) **A Sample Job Description Excerpt** **Page 10**

This may be used for pre-hire purposes in job descriptions in which driving may be required. Those job descriptions should contain this verbiage or similar, depending on the physical requirements of the position;

2.) **Automobile Acknowledgement – Employee & Patient/Client – Home Health Agency** **Page 11**

Should be signed by both employee and patient/client and retained in employee file and patient/client file. These are great if retained along with the patient's auto insurance information.

3.) **Automobile Acknowledgement – Employee & Patient/Client – Hospice** **Page 12**

Should be signed by both employee/volunteer and patient/client and retained in employee/volunteer file and patient/client file.

4.) **Automobile Acknowledgement – Contractor & Patient/Client – Registry** **Page 13**

Should be signed by both contractor and patient/client and retained in contractor file and patient/client file.

Note: many registries and other firms operating on the contractor model do not wish to collect patient data or contractor data due to the concern of breaching the contractor/employee model. So these forms – for contractor model firms – are *a suggestion only*.

The majority of these documents are designed for employee/employer (W-2) model agencies/hospices;

5.) **Automobile Insurance Acknowledgement – Business Usage** Page 14

This verbiage may be used in a job offer letter or other personnel communication in which employee/contractor is advised of the need to potentially notify their auto insurance carrier;

6.) **Automobile Accident Incident Report Form** Page 15 - 17

This form is to be used to document information (circumstances, participants) for any motor vehicle accident. This form should be as detailed as possible and should serve as a 'snap shot' of 'who, what, where, when, and how.'

Do not use this form to make any internal judgments/opinions/rulings on liability in an accident. Just as with medical records, almost everything is accessible in a legal matter if plaintiff's counsel wants to obtain. Strictly use this form to gather information and report fact. Do not 'editorialize' with this document;

7.) **IMPORTANT - Automobile Policy Acknowledgement – FCRA Acknowledgement** Page 18

This form is necessary and should be used for all hires (and potentially for 'ancillary care' contractors such as PTs, OTs, MSWs, etc.) and retained in employee personnel file.

This form:

- a.) advises the employee of acceptable driver standards within the agency;
- b.) advises the employee that the agency *maintains* a formalized, codified driver safety program (so violation could result in loss of employment/assignment);
- c.) has the employee sign an acknowledgement that MVR records will be obtained and used in determining their suitability for employment.

The usage of MVR reports in determination of suitability for employment is an HR issue that relates to ADA and other legal matters. The basics for usage of the MVR criteria, however, are provided in this form. That is: **pre-hire notification** (both in the job description and in this form) and **pre-hire acknowledgement/permission for MVR collection by employee** (this form).

This form is very important and should be retained in the employee's file along with their driver's license, auto insurance information, and other personnel documents

Risk Management / Common Sense Tips

Hopefully, this document and its various attachments will be helpful to you and your management staff as you deal with auto exposures at your firm.

In addition to providing this material, we wanted to share some common sense risk management tips which might also be of assistance for you. These are collected from our years of experience in working with clients. These are not presented in any particular order. If you have any specific inquiries on these items, or on anything which you do *not* see presented here, you may direct them to our office.

- For MVRs, we use one of two services. Both are online and can be found at:

<http://www.dmv.org/fl-florida/driving-records.php>

<http://www.hrvault.com/mvrs.htm?gclid=CJGaxKKago8CFRdfgQodOzwTuw>

The first URL is for Florida records, whereas HRVault collects from all 50 states. We do a large volume of MVR checks and pay slightly less than \$3.00 per report. You should be paying between \$2.50 - \$5.00 per MVR check. This is a very simple task and can be done online instantly (in most cases)

- Some insurance policies contain a 'warranty' of underlying auto coverage (by patient or by employee). **Be wary of these policies!** A policy warranty is essentially a guarantee by you (the named insured) that a specific limit of coverage is carried by the person driving around on your business purpose(s). In other words, the insured is warranting that the employee (or patient) is carrying a specific dollar limit of insurance.

These are very tricky because, in the event of a claim, coverage may be denied to you (the insured), if the underlying limits are not in strict accordance with what the insurance company has stipulated.

An example: an HHA is involved in an at-fault auto accident in which several parties are severely injured. At the time of the accident, her insurance had been lapsed for two days due to a late premium payment.

If the home health agency has a policy warranty insurance program – warranting that all employees carry insurance – then the insurance company could conceivably deny coverage for this claim.

We do not normally sell these policies unless there is a reason (usually that the account has some extenuating circumstance necessitating that it be placed on such a policy.) But be watchful for these policies and programs.

- It's simplistic, but seatbelts do work. If employees are driving to patients' homes or to facilities, **remind them** to wear a seatbelt. This was reinforced within as our agency as we have a client dealing with a workers' compensation claim (from July) in which an RN was ejected from her car in an MVA while driving between visits. This is a \$200,000 workers' compensation claim that could have been avoided with a seatbelt. Seatbelts should be worn by patients as well. In handi-vans, patient (chair/stretchers) restraints should be used.

- Similar to seatbelt education, it is a good idea to reinforce that – during working hours and especially when a patient is in the employee's car or the patient's own car – there should be **no one** other than **patient and the caregiver/employee** in the vehicle. Additional personnel (friends, family, and acquaintances) can distract from the driver and also create unnecessary liability for the agency.

We had an agency client some years ago who – during an inservice – had the Director of Nursing sing karaoke to George Thorogood's "I Drink Alone"...with the words changed to "I DRIVE Alone". This was done in response to HHAs and CNAs bringing children, etc. on patient visits.

We're not suggesting that your agency needs to go to this extreme, but you understand the suggestion: it should be the caregiver and patient **only** in the working hours in a vehicle on company time.

- Many firms, especially those on the contractor model and/or those using a high percentage of subcontracted specialty RNs, require caregivers to maintain individual liability policies (like those obtained via NSO/HPSO, CM&F, etc.)

Some of these policies also include HNO. If you know that you have field staff with these policies, obtain a copy (if not doing so already) and maintain in the file. In the event of a claim, these policies may offer yet another layer of insurance coverage for the agency.

- Some home care firms prefer that employees drive patients cars (as they tend to be newer and as patients will often carry higher limits of auto liability). Some insurance carriers prefer that the employees limit their driving to their own [employee] vehicles (as they have familiarity and the home care firm has likely verified the employee's auto insurance.)

Sabal is non committal on this matter. In some cases, an employee that is unfamiliar with a patient's vehicle could indeed be more hazardous than if the employee was driving their own car. At the same time, many patients' have well-maintained (and newer) cars and are more comfortable being driven in their own vehicles.

Our advice on this matter is that – as part of the new patient intake process – the 'driving question' is addressed as part of the intake interview. This is especially useful if this intake interview is performed by a senior staff (RN, Administrator, etc.) who can answer questions from the patient or the patient's family.

At the initial intake interview, it is also helpful if the intake coordinator can do a quick once-over of the patient's vehicle (if that vehicle is to be the primary mode of transportation.) This is akin to the walk-around that is done on rental cars prior to driving off the rental lot to ensure that there is no damage which may be charged to the renter upon return of the vehicle.

If the agency employee is going to be using the patient's vehicle, then it's important to ensure the working order of the car (for the agency employee), as well as protect *the agency* from any unfounded allegations which may come later that the agency employee in some way damaged the patient's vehicle.

- Some agencies do perform annual MVR checks and obtain renewals of their employees' proof of auto insurance at renewal of same. This is something that we definitely recommend. At the same time, we understand that this is difficult in some circumstances due to the volume of employees and of records.

Sabal advocates doing the MVR annual renewal and insurance check at the same time in which employees undergo their annual CE/QA qualifications. If your firm can make this part of the annual certification, it may make for a smoother process for updating these records.

- **Post – Claim Procedures – IMPORTANT!**

Obtain as much information *from the other person/parties involved* as possible. This is particularly important when your employee is *not* at fault. If the damage can be attributed to the other driver (and their insurance), the information collected will be critical in ensuring that your firm and your insurance is not held responsible for damages/injuries sustained in the accident and the at-fault driver/at-fault driver's insurance *is* held responsible. Particularly important pieces of information are: license number of the other driver; insurance information of the other driver, and contact information for the other driver. Sometimes, the law enforcement officer/public service aide attending to a motor vehicle accident does not collect this data, so it falls on the insured to gather it.

If your employee is able, counsel them to collect as much information from the other driver and/or attending law enforcement officer as possible at the time. **Definitely obtain the number of the incident/accident report and the municipality in which accident occurred.**

Summary

We hope that these forms, these insights, these tips...will be helpful to you and to your staff.

Know that HNO accidents in home care are like shark attacks. That is, they're very rare, they are rarely serious, and you can take precautions (many of which are contained herein) to minimize your exposure to them. At the same time – just like shark attacks – bad home care HNO incidents get *a lot* of publicity. That is why the insurance industry is so wary of this exposure; more for the 'bark' than for the 'bite'.

It is also worthwhile to remember that not all insurance companies are created equal. Some carriers will – upon presentation of a serious claim – be far more adversarial than they will be cooperative. If you take all the precautions and necessary steps (again, contained herein) to protect yourself and your employees, carriers are less likely to be able to find a way in which to 'escape' coverage. The last place in which you want to find yourself (or your agency) after suffering a serious loss...is fighting with your insurance company to try to get a claim paid.

Proper risk management protocols and procedures will go a long way towards preventing negative outcomes in an insurance dispute. Insurance contracts – and courts of law – are designed to err on the side of the insured. As long as you have made a good faith effort to implement **and comply** with safe working and driving practices, you should be protected in the event of a serious work-related auto claim.

Good Luck in managing your agencies, hospices, and registries. Do not hesitate to contact Sabal with any questions, concerns, or requests for reprints.

For inclusion in all job descriptions in which use of personal passenger autos will be required:

[Position Name] will require that you:

- have access to dependable mode(s) of transportation;
- have physical ability to drive a motor vehicle;
- can provide and maintain current proof of auto insurance that complies with state requirements for financial responsibility, a copy of which will be maintained in your permanent personnel file;
- have a valid driver's license for the State of primary operation of motor vehicle(s), a copy of which will be maintained in your permanent personnel file;
- will authorize **[Agency Name]** to obtain a motor vehicle record ('MVR') as part of your application;
- are able to abide by the Driver Safety Protocol of **[Agency Name]**;
- notify **[Agency Name]** immediately on all changes in your driver or insurance status which may affect your ability to comply with the directives shown in this section.

This form should be obtained by the agency for every case in which driving is involved. This form is essential in cases where the agency employee will be driving the patient's car.

This form should be retained by the agency and should be collected as part of the new client/new patient intake protocol.

Automobile Acknowledgement

Section 1: Employee Acknowledgement

I, _____, an employee of [HOME HEALTH AGENCY NAME HERE], agree to operate the vehicle furnished by [CLIENT/PATIENT/GUARDIAN NAME HERE] as it relates to services for the benefit of this client in accordance with the services provided by this agency.

/_____
Employee's Signature/Date

Section 2: Client Acknowledgement

I, _____ (Client/Patient/Guardian), give permission to employees of [HOME HEALTH AGENCY NAME HERE] to operate my personal automobile in accordance with the services provided by their agency. I also certify that I currently maintain Personal Automobile Liability Limits of at least \$100,000/\$100,000 or \$100,000 Combined Single Limit on my personal automobile.

/_____
Client/Patient/Guardian Signature/Date

This form should be obtained by the hospice for every patient in which driving is involved. This form is essential in cases where the hospice employee will be driving the patient's car.

This form should be retained by the hospice and should be collected as part of the new client/new patient intake protocol.

Automobile Acknowledgement
Section 1: Employee Acknowledgement

I, _____, an employee of [HOSPICE NAME HERE], agree to operate the vehicle furnished by [CLIENT/PATIENT/GUARDIAN NAME HERE] as it relates to services for the benefit of this client in accordance with the services provided by this hospice.

/

Employee's Signature/Date

Section 2: Client Acknowledgement

I, _____ (Client/Patient/Guardian), give permission to employees of [HOSPICE NAME HERE] to operate my personal automobile in accordance with the services provided by the hospice. I also certify that I currently maintain Personal Automobile Liability Limits of at least \$100,000/\$100,000 or \$100,000 Combined Single Limit on my personal automobile.

/

Client/Patient/Guardian Signature/Date



This form should be obtained by the registry for every patient in which driving is involved. This form is essential in cases where the registry contractor will be driving the patient's car.

This form should be retained by the registry and should be collected as part of the new client/new patient intake protocol.

Automobile Acknowledgement

Section 1: Contractor Acknowledgement

I, _____, an independent contractor for [REGISTRY NAME HERE], agree to operate the vehicle furnished by [CLIENT/PATIENT/GUARDIAN NAME HERE] as it relates to services for the benefit of this client in accordance with the services provided by this registry.

/

Contractor's Signature/Date

Section 2: Client Acknowledgement

I, _____ (Client/Patient/Guardian), give permission to independent contractors of [REGISTRY NAME HERE] to operate my personal automobile in accordance with services provided. I also certify that I currently maintain Personal Automobile Liability Limits of at least \$100,000/\$100,000 or \$100,000 Combined Single Limit on my personal automobile.

/

Client/Patient/Guardian Signature/Date

If your agency utilizes an offer letter for new hires, we recommend inclusion of the following:

[Position Name] may require that you use your own auto – or possibly a patient's auto – in the conduct of **[Agency Name]** business.

[Agency Name] recommends that you contact **your** car insurance company (for example, GEICO, State Farm, or Allstate) and advise the insurance company that you may be using your car for some 'on-the-job driving'.

Failure to do so could jeopardize your insurance coverage, even if you are involved in a non-work related accident.

[YOUR FIRM NAME HERE]
Automobile Accident Investigation Form

1.) Name of Contact	2.) Supervisor Conducting Accident Investigation:
3.) Date & Time of accident:	4.) Location:
5.) Please describe what is alleged to have occurred:	
6.) Describe road & weather conditions:	
7.) Employee/Driver Name:	8.) Department:
9.) Vehicle make, model & year:	10.) Vehicle ID #:
11.) Was employee drug tested:	12.) Copy of police report obtained?
13.) Was employee cited in any way (Y/N):	14.) Violation cited:
15.) Describe injuries sustained by employee:	
16.) Describe damage to vehicle:	
17.) Current location of vehicle:	

CLAIMANT INFORMATION

- 18.) Claimant name: 19.) Claimant address:
- 20.) Home phone: 21.) Work phone:
- 22.) Describe claimant injuries:
- 23.) Describe damage to claimant property:
- 24.) Claimant vehicle make & model year: 25.) Location of claimant vehicle:
- 26.) Did police report claimant contributed to accident:
- 27.) Was claimant cited: 28.) Violation cited:

ADDITIONAL CLAIMANTS INFORMATION

- 29.) Claimant name:
- 30.) Claimant address:
- 31.) Home phone #: 32.) Work phone #:
- 33.) Describe claimant injuries:
- 34.) Describe damage to claimant property
- 35.) Claimant vehicle make & model year: 36.) Location of claimant vehicle:
- 37.) Did police state claimant contributed to accident:
- 38.) Was claimant cited: 39.) Violation cited:

ATTACH INFORMATION FOR ADDITIONAL CLAIMANTS

Witnesses

40.) Name:

41.) Address:

42.) City:

43.) State:

44.) Zip:

45.) Contact Phone #:

ATTACH INFORMATION FOR ADDITIONAL WITNESSES

46.) Employee statement attached:

47.) Claimant statement attached:

48.) Witness statement attached:

ACCIDENT INVESTIGATION RESULTS/CONCLUSIONS/CORRECTIVE ACTIONS (OPTIONAL)

49.) Was accident preventable? If yes how could employee have avoided accident?

50.) Did employee receive sanctions? If yes list sanctions.

51.) Was employee wearing a seat belt?

52.) Was condition of vehicle a contributing factor?

53.) Was a daily vehicle inspection conducted on day of accident?

54.) What was the mileage of the vehicle?

55.) Has this employee been involved in previous accidents? If yes give short description reviewed for this driver?

56.) When was last motor vehicle record reviewed for this driver?

57.) When was the last time this employee took a defensive driving course?

58.) Signature of Department Head/Supervisor

Date:

Subject: DRIVER SAFETY POLICY FOR [YOUR COMPANY NAME HERE]
 To: All Employees of [YOUR COMPANY NAME HERE]
 From: [YOUR NAME HERE]

YOUR COMPANY NAME HERE, INC. (hereinafter, "**YOUR COMPANY NAME**") values the safety of its workers and clients above all else. As a result, all of our drivers must undergo a background check in order to ensure that only "Safe" drivers are employed by **YOUR COMPANY NAME**.

If you are considering working with **YOUR COMPANY NAME**, please be advised that the following requirements must be met in order for you work for our firm:

A current Motor Vehicle Record (MVR) will be obtained, evidencing your driving record(s). Unacceptable criteria for a **YOUR COMPANY NAME** employee includes, but is not limited to, the following:

1. In excess of three (3) points in the prior three (3) years period for any MOVING violation.
2. Any conviction for: Driving Under the Influence ("DUI"), Driving While Impaired ("DWI"), Excessive Speeding, Reckless Driving, or any criminal/misdemeanor charge relating to the operation of a licensed or unlicensed motor vehicle.
3. Lack of a valid [YOUR STATE OF OPERATION] Drivers' License *
 - * If you are applying for a position with **YOUR COMPANY NAME**, and currently possess a valid out-of-state Driver' license, you will have 30 days time from date-of-hire to comply with this requirement and produce a valid [YOUR STATE OF OPERATION] Drivers' License.
4. Lack of proof of valid insurance for your personal automobile or other mode of conveyance that meets or exceeds [YOUR STATE OF OPERATION] financial responsibility statute(s).

Please be advised that failure to comply with the above requirements will prevent **YOUR COMPANY NAME** from considering you for our firm. Furthermore, employees' lack of compliance with the Driver Safety Policy of **YOUR COMPANY NAME** may result in reassignment or termination. Thank you for considering a career with **YOUR COMPANY NAME**

In compliance with Public Law 91-508 (the Fair Credit Reporting Act) and Public Law 104-208 (the Consumer Credit Reporting Reform Act), and applicable laws of the [YOUR STATE OF OPERATION], this notice is to inform you that consumer reports including Credit Bureau Reports, Motor Vehicle Reports, Criminal Records, Drug Tests, Consumer Investigations, and Medical Information may be obtained in connection with your application for employment or current employment. If obtained, this consumer report may be used in making decisions concerning your application for employment and/or employment status with this company.
Please attach a copy of driver's license and auto insurance card.

Signature of Employee/Applicant	Date
Print Name	
Driver's License # and State Issued:	