

# **WILLIAMSON COUNTY MOTOR POOL/VEHICLE RENTAL POLICY**

## **GENERAL PROVISIONS**

Williamson County maintains a limited number of pooled vehicles for use by all Williamson County employees for the purpose of travel on official county business. This travel will be limited to training, continuing education, and county meetings as approved by the official or department head.

These vehicles must be used for official county business only and not for personal use.

All vehicles checked out must go through Fleet Services for approval. Only authorized or approved drivers are to be operating the vehicle at any time. Vehicles shall not be loaned out for personal use or used to transport family/friends while on official County business.

Each passenger as well as the driver must wear a seatbelt at all times.

The operator/driver must report all accidents, minor or serious, to the Fleet Services Department as soon as possible

All pooled vehicles are considered “non-smoking” vehicles. Alcohol and/or drugs must never be used while operating County vehicles.

The operator/driver of the vehicle shall operate the vehicle in accordance with all state and local laws.

The operator/driver of the vehicle assumes all responsibility for fines and/or traffic violations while operating a County owned vehicle

When a vehicle is in use, it is to be parked in a secured parking area. When vehicle is left unattended, keys must be removed and vehicle should be locked at all times.

Fueling of vehicle will be provided by a County on site fuel card and a Fuelman card for offsite fueling. Instructions on using this fuel card will be provided when the vehicle is picked up.

Employees who misuse vehicles will be subject to disciplinary action, up to and including dismissal, depending on the nature of the misuse. “Misuse” includes a) violations of traffic laws b) careless operation resulting in damage to the vehicle or injury to persons or property c) use of a vehicle for personal business or unauthorized commuting purposes and d) use of a vehicle contrary to the provisions of this policy.

All fleet vehicle policies and provisions should be followed in accordance with the County Budget Order. Proper documentation/back up shall be provided for check out of a county vehicle as required in section XVII Travel Policy of the Budget Order.

All vehicle users must read and follow the rules and procedures set forth in the County Vehicle Management and /Use Policy.

Vehicle operators shall not give rides to any person unless directly related to conducting County business.

Vehicle operators shall not tow, push, or start other vehicles.

## **VEHICLE MAINTENANCE**

Fleet Services shall be responsible for performing vehicle maintenance services such as oil changes, brake checks, etc and shall perform these checks as required according to vehicle mileage and/or age of vehicle.

Should the operator have a major repair or breakdown during use of a pooled vehicle, the operator must contact his or her immediate supervisor and the Fleet Services Director or his designated representative as soon as possible.

Pooled vehicles will be auctioned, transferred or back up vehicles at the recommendation of the Fleet Services Director.

## **FUNDING**

Budgeting for the repairs and maintenance of pooled vehicles will be handled through the Budget Office each year during the budget process.

All maintenance related expenditures will be covered through our Fleet-Pooled Car fund budget. These costs include but are not limited to vehicle repairs, engine failure, brake repairs, tune ups, oil changes, tire maintenance, registration and inspection costs.

The expense (daily rental fee and fuel) for the operation of a Williamson County pooled car/van is born by the user's department. Budgeting for pooled vehicle check out by the official or department head should include not only the cost of the daily rental but fuel in the appropriate line items to and from the point of destination.

Daily rental for a four-door standard vehicle will be \$33.00 per day. Daily rental for a passenger van is \$60.00 per day with unlimited mileage; a day is considered midnight to midnight. Any portion of that time used will be billed as a "full day"

These rates cover standard wear and tear on the vehicle itself as well as comprehensive insurance coverage.

Travel expenses related to the operation of a motor pool vehicle, such as tolls and parking fees, may be reimbursed in accordance with the Williamson County Budget Order Policy. All receipts should be kept for backup/justification.

## **CHECK OUT PROCEDURE**

- 1.) Before entering the vehicle perform a “walk around” inspection of the vehicle to determine general condition. Any body damage noted should be immediately reported to the Dispatcher.
- 2.) Write down the vehicles beginning mileage.

Driver must maintain a current, valid driver’s license and be at least 21 years of age. Driver must provide this form of identification upon each check out, no exceptions are allowed with this requirement.

Driver must contact Fleet Services to reserve a vehicle. Driver must fill out a “Pooled Vehicle Check Out” form (Attachment A) complete with Department Head approval approved by Fleet Services as an authorized driver as well. Driver must have a Vehicle Use Driver Acknowledgment Form on file with the human Resources office showing a clear driving record (Attachment C). Forms must be submitted no less than three days prior to your check out date. Forms may be faxed to 943-3398. Vehicles will be loaned out on a first come, first serve basis. The Fleet department is open from 7:00AM to 3:30PM Monday through Friday for the pick up and return of all loaner vehicles. Vehicles not being used for out-of-town trips must be returned to the Fleet Department parking lot each night; however, vehicles returning from out-of-town trips after 5:00 p.m. may be parked overnight at the driver’s residence and returned promptly the next morning. Failure to pick up a vehicle before 3:30 p.m. means that the vehicle will not be available until the next morning on a scheduled work day. Any vehicle brought back after 4pm on a Friday will be charged for the weekend unless prior approval by the Fleet supervisor has been given.

## **ACCIDENTS**

If an accident does occur, whether your fault or others, you must:

- 1) Get immediate medical attention if injured and stay calm
- 2) Make no statements regarding guilt or fault
- 3) Notify local or state police
- 4) Record as much information about the accident as possible to include witnesses’ contact information. Record insurance company’s name/number as well as license plate numbers, date/time of accident, vehicle descriptions and any other relevant information
- 5) Never agree to make any type of payment for the accident
- 6) Complete a “Pooled Vehicle Accident” form (Attachment B). A copy of this form should be forwarded to driver’s immediate supervisor and Risk Coordinator as soon as possible.

- 7) Refer all questions from lawyers, the other party to the accident and anyone else to the Risk Coordinator and/or insurance company at all times
- 8) The County's insurance is liability only with a \$1,000 deductible. When a county employee is at fault the damage incurred to the county vehicle will be at the County's expense

## **FLEET SERVICES**

Fleet Services assumes responsibility for pooled vehicles, to include the following:

- a) Verifying that proper forms are completed and approved prior to a pooled vehicle leaving County property
- b) Verifying that scheduled maintenance has occurred
- c) Disposing of pooled vehicles
- d) Tracking warranties and repairs
- e) Updating and recording maintenance log or database on pooled vehicles
- f) Regularly review and inspect all service records, maintenance and registration requirements
- g) Assisting Risk Coordinator and insurance company during accident investigation or in obtaining information related to

## **CHECK IN PROCEDURE**

- 1.) Write down ending mileage.
- 2.) Vehicle operators shall remove all personal items from the vehicle including food wrappers and drink containers, leaving the vehicle clean and litter free.
- 3.) Vehicle should be returned with a full tank of fuel.
- 4.) Return the keys and rental form to Fleet Maintenance.

(ATTACHMENT 'A')

**MOTOR POOL/VEHICLE RENTAL REQUEST FORM**

Name: \_\_\_\_\_ Department: \_\_\_\_\_

Extension: \_\_\_\_\_ Email Address: \_\_\_\_\_

List all Driver's Name(s) and Driver's License number(s) below:

1. \_\_\_\_\_ 2. \_\_\_\_\_

3. \_\_\_\_\_ 4. \_\_\_\_\_

Person above responsible for the vehicle \_\_\_\_\_

- You will be required to show a valid driver's license when you pick up the vehicle
- Vehicles must be used for OFFICIAL WILLIAMSON COUNTY BUSINESS ONLY
- Vehicle must be returned with a full tank of gas; if not, driver's/department's line item will be charged at the current Fuelman rate per gallon

Type of Vehicle Requested: Car \_\_\_\_\_ Passenger Van \_\_\_\_\_

Pick Up Date: \_\_\_\_\_ Pick Up Time: \_\_\_\_\_

Return Date: \_\_\_\_\_ Return Time: \_\_\_\_\_

Destination(s): \_\_\_\_\_

Purpose of Travel: \_\_\_\_\_

Line Item or Department to Charge Vehicle Rental Fee to: \_\_01-XXXX-XXXX-004232

TX Plate No \_\_\_\_\_ VIN \_\_\_\_\_

Approved By: \_\_\_\_\_

Department Head

Fleet Representative

Please email this form to [rroddgers@wilco.org](mailto:rroddgers@wilco.org) and cc [roanderson@wilco.org](mailto:roanderson@wilco.org) and [rschneider@wilco.org](mailto:rschneider@wilco.org) or fax to Fleet Services at (512) 943-3398.

## (ATTACHMENT 'B')

### MOTOR POOL/VEHICLE TRIP FORM

Name:	Dept:	Date:
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Unit #	Make	Model	Year	VIN

#### Pre-trip

- 1) I have read and understand the WILLIAMSON COUNTY MOTOR POOL/VEHICLE RENTAL POLICY.
- 2) I understand that I lose the privilege of operating a motor pool vehicle should my licenses be suspended or revoked.
- 3) I realize that failure to follow the driver responsibilities outlined in this policy may subject me to disciplinary action.
- 4) I have a Valid Texas Drivers License.
- 5) Perform a pre trip inspection using the provided form.
- 6) Receive instructions on fuel cards.
- 7) Fleet will provide information and location of liability insurance card and vehicle incident crash vandalism report.
- 8) Please advise fleet if you are leaving Williamson County. Fleet will provide you with approved fueling site information in your travel area.

Pick up Date:     /     /	Pick up Time:	Beginning Mileage:
Gas Tank Full: YES   NO	Vehicle Clean: YES   NO	Vehicle Damage:

\_\_\_\_\_  
Print Name (Operator)

\_\_\_\_\_  
Operators Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Department Head

\_\_\_\_\_  
Fleet Representative

#### Post-trip

- 1) Return vehicle with a full tank of fuel.
- 2) Remove all personal items and trash from the vehicle.
- 3) Perform a post trip inspection using the provided form.
- 4) Return fuel cards and keys to Fleet Services.
- 5) Report any vehicle problems to Fleet Services.

Return Date:     /     /	Return Time:	Ending Mileage:
Gas Tank Full: YES   NO	Vehicle Clean: YES   NO	Vehicle Damage:

Daytime Fleet Services Phone number: (512) 943-3349

After hours Emergency Fleet contact: Rex Schneider cell (512)970-0697 or home (512) 309-4255

**(ATTACHMENT 'C')**

**Williamson County  
Vehicle Use Driver Acknowledgement Form**

I have read this policy and appendices and understand my responsibilities to be a (check all that apply):

- ☐ County-owned or leased vehicle/equipment operator
- ☐ Driver of a personal vehicle on county business
- ☐ County emergency vehicle driver

I agree to comply with the policy and understand that failure to comply may result in disciplinary action up to and including termination. If County emergency vehicle driver is checked, I agree to comply with Chapter 546 of the Texas Transportation Code which defines operation of an authorized emergency vehicle and certain other vehicles.

I hereby authorize Williamson County, at the county's discretion, to obtain a copy of my driving record and may use the driving record to qualify me as a driver of a county vehicle or personal vehicle used on county business as indicated above.

Name (please print): \_\_\_\_\_

Driver's License #: \_\_\_\_\_

DOB: \_\_\_\_\_

Department Name: \_\_\_\_\_

Signed: \_\_\_\_\_

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

The signed copy of this program will become part of your personnel file.