

# Employee Vehicle Operation Consent Form

Employee Information

Full Name:

Position/Title:

Department:

Driver's License Number:

Vehicle Information

Type of Vehicle to be Operated:

Purpose of Use:

Consent

I hereby acknowledge and consent to operate company-owned or company-assigned vehicles in accordance with all company policies and relevant traffic laws. I understand that failure to comply may result in disciplinary action.

☐ I agree and provide my consent.

Signature:

Date: