



Town of Beekman DRIVER AND AUTOMOBILE INSURANCE INFORMATION

The information below must be completed for employees using their personal car for town business or as an emergency vehicle. Only insured, registered inspected vehicles may be used for town business.

Name _____
FIRST MIDDLE LAST

_____/_____/_____
DATE OF BIRTH # OF YEARS A LICENSED DRIVER DRIVER'S LICENSE # STATE issued license

Completed Approved Driver Education Course Yes _____ (Year _____) No _____

Involved in _____ # of accidents in last 5 years. Has your license ever been revoked? No ___ Yes ___ If Yes, explain on back

Complete the following information for every vehicle the above person may use for Town business:

YEAR MAKE MODEL PLATE # STATE IDENTIFICATION/ENGINE NUMBER

Auto is insured by _____
INSURANCE COMPANY NAME Insurance Company's phone #: POLICY NUMBER

Describe the vehicle's insurance coverage (the amount required by is in parentheses):

Injury per person (\$100,000) _____ Property Damage (\$5,000) _____
Injury per accident (\$300,000) _____ Fire and Theft Insurance Yes _____ No _____
Collision Insurance Yes _____ No _____ Deductible \$ _____

Owner of vehicle if different that staff member above: Name: _____

Address _____

Policyholder stated on the insurance if not the staff member above: Name: _____

Address _____

DRIVER'S STATEMENT OF RESPONSIBILITY & PERMISSION

I hereby certify that I will operate all vehicles with great care and will abide by all traffic laws and safety standards. I hereby agree and grant permission to Town of Beekman to secure and review my motor vehicle record which will be entered into the LENS program.

Signed _____ Date _____

Witness: _____ Date _____

OWNERS STATEMENT OF PERMISSION

I hereby certify that I am the owner of the above vehicle and certify that my vehicle is properly registered, inspected and insured and grant permission for it to be used for town business as authorized by the Town Supervisor or her designee.

Employee Signature _____ Date _____

For office use only

Supervisor's Signature _____ Date _____