



**VEHICLE AUTHORIZATION APPLICATION**  
***(APPLICATION MUST BE APPROVED PRIOR TO DRIVING)***

Managers: Please return this form with a copy of the applicant's driver's licence to Human Resources

All personnel **MUST** complete this form in order to be approved to operate their personal vehicle, or a Jeffery's Greenhouse's owned, leased or rented vehicle in the conduct of company business. Carefully read this form and provide the following information:

Application to operate: (check all that apply)

Company Vehicle

Personal Vehicle

PERSONAL INFORMATION (please print):

\_\_\_\_\_  
APPLICANT NAME

\_\_\_\_\_  
DRIVERS LICENCE NUMBER

\_\_\_\_\_  
HOME ADDRESS (that appears on driver's licence)

\_\_\_\_\_  
DATE OF BIRTH (MM/DDYY)

\_\_\_\_\_  
MANAGER/SUPERVISOR

**Safe Driving Requirement**

I acknowledge that I must operate any vehicle used on Company business in a safe, responsible manner and in compliance with the law. I will use vehicles on Company business only as authorized by my supervisor. I will follow all applicable rules/requirements. I understand that I am subject to Company disciplinary procedures for improper use of any vehicle on Company business. If using my own personal vehicle on Company business, I also agree to maintain the vehicle in safe working order and will supply proof of such periodic maintenance when requested.

**Physical Condition**

I have no physical or mental condition that may impair my ability to drive. If my condition changes such that my ability to drive may be impaired, I shall notify my supervisor immediately.

**Motor Vehicle Licence**

I am licenced to drive. I have attached a photocopy of my licence to this form. I will promptly notify my supervisor my licence is impounded, suspended, revoked or expires. I authorize the Company and/or its insurance representative to obtain a copy of my official provincial motor vehicle record including the status of my licence and any traffic convictions. I further authorize the Company to obtain updates of this information during my employment.

**Insurance**

I hereby authorize Jeffery’s Greenhouses (the Company), to periodically obtain and review my motor vehicle history as needed in order to evaluate my insurability when driving a company owned, rented or leased vehicle. I understand that this information will be kept confidential and released only to those Company representatives charged with overseeing the Company’s insurance and employment policies. I have been informed that any authorized driver of a Company vehicle is covered by Company insurance.

If driving my own personal vehicle, I agree to maintain insurance coverage with a minimum liability of \$2 million dollars on said vehicle, throughout the period that I operate my vehicle to conduct Company business. I have attached a copy of my insurance certificate to this form.

**Employment**

I understand that I have an obligation and responsibility to the Company and any negative change in the status of my driving record may result in the revocation of the privilege of operating a Company owned, rented, or leased vehicle and that my employment may be contingent upon my ability to legally operate a motor vehicle for Company business as outlined in my job description or employment contract.

\_\_\_\_\_  
DRIVER APPLICANT SIGNATURE

\_\_\_\_\_  
DATE

Permission is hereby granted to the applicant effective \_\_\_\_\_  
(mm/dd/yy)

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

Printed Name: \_\_\_\_\_

Position: \_\_\_\_\_