

DIOCESE OF ALLENTOWN
DRIVER INFORMATION FORM

Driver

Name _____ Date of Birth _____
Address _____ Home Phone _____
_____ Cell Phone _____
Driver's License # _____ Date of Expiration _____

Vehicle That Will Be Used

Name of Owner _____ Year / Make of Vehicle _____
Address of Owner _____ Model of Vehicle _____
_____ Date of Expiration _____
License Plate # _____

If more than one vehicle is to be used, the aforementioned information must be provided for each vehicle.

Insurance Information

Insurance Company _____ Liability Limits of Policy* _____
(Please note: minimal, acceptable liability limit for privately-owned vehicles is \$100,000/\$300,000)
Policy # _____ Date of Policy Expiration _____

*** Please be aware that as the driver of this vehicle, your insurance is primary***

*** Driver MUST complete the *Be Smart – Drive Safe* on-line training ***

Driving Record

1) I certify that I have NOT had a conviction for any of the following violations in the past ten years:

- Driving under the influence of alcohol or drugs
- Hit and Run
- Failure to report an accident
- Negligent homicide
- Operating a Motor Vehicle during a period of suspension or revocation
- Using a Motor Vehicle for the commission of a felony
- Operating a Motor Vehicle without authority (grand theft)
- Permitting an unlicensed person to drive
- Reckless Driving
- Speed Contest (drag racing)

2) I certify that my driving record does not include a total of three accidents and/or moving violations in the past five years.

Certification

I certify that the information given on this form is true and correct to the best of my knowledge. I understand driving for church ministry is a profound responsibility and I will exercise extreme care and due diligence while driving. I understand that as a volunteer driver, I must be 21 years of age or older, possess a valid driver's license, have the proper and current license and vehicle registration, and have the required insurance coverage in effect on any vehicle used for a parish, school or diocesan location activity or business. I have successfully completed the BE-SMART, DRIVE SAFE on-line training. I agree that I will refrain from using a cell phone or any other electronic device while operating my vehicle.

Signature

Date