## SAM-TRAVEL

## AUTHORIZATION TO USE PRIVATELY OWNED VEHICLES ON STATE BUSINESS, STD. 261

## STEP ACTION

- THE EMPLOYEE READS THE CERTIFICATION. THE EMPLOYEE ENTERS: DRIVER'S LICENSE NUMBER, ISSUING STATE, AND EXPIRATION DATE. THE EMPLOYEE SIGNS THE FORM, PRINTS THE SIGNATURE AND DATES THE FORM.
- THE APPROVING AUTHORITY SIGNS THE FORM, ENTERS TITLE ELEMENT AND DATES THE APPROVAL.
- 3 EACH YEAR THE EMPLOYEE AND APPROVING AUTHORITY RENEW THE FORM BY SIGNING AND DATING THE FORM.

## SAM-TRAVEL

Print Clear

AUTHORIZATION TO USE PRIVATELY OWNED VEHICLES ON STATE BUSINESS

STD 261 (REV 3-95)

STATE OF CALIFORNIA

This approval must be renewed annually.

Supervisor: Retain Original Copy

I. CERTIFICATION

In accordance with State Policy (S.A.M. 0753 & 0754) approval is requested to use privately owned vehicles to conduct official State business.

I hereby certify that, whenever I drive a privately owned vehicle on State business, I will have a valid driver's license and proof of liability insurance in my possession, all persons in the vehicle will wear safety belts and the vehicle shall always be:

- Covered by liability insurance for the minimum amount prescribed by State Law (\$15,000 for personal injury to, or death of one person;
   \$30,000 for injury to, or death of, two or more persons in one accident; \$5,000 property damage). Vehicle Code Section 16020 (effective July 1, 1985) requires all motorists to carry evidence of current automobile liability insurance in their vehicle.
- 2. Adequate for the work to be performed.
- 3. Equipped with safety belts in operating condition.
- 4. To the best of my knowledge, in safe mechanical condition as required by law.

I understand that the mileage rate I claim is full reimbursement for the cost of operating the vehicle, including fuel, maintenance, repairs and both liability and comprehensive insurance.

Ifurther certify that, while using a privately owned vehicle on official State business, all accidents will be reported on form STD. 270 within 48 hours (S.A.M. 2441).

I understand that permission to drive a privately owned vehicle on State business is a privilege which may be suspended or revoked at any time.

DRIVER'S LICENSE NUMBER	STATE	EXPIRATION DATE
EMPLOYEE'S SIGNATURE	PRINT NAME	DATE SIGNED
	II. APPROVAL	
Use o	of a privately owned vehicle on State business is approved.	
APPROVING AUTHORITY SIGNATURE	TITLE	DATE APPROVED
	III. RENEWAL	
I have reviewed the above co	ertification and approval and certify that the information prov	rided is correct and valid.
EMPLOYEE'S SIGNATURE	APPROVING AUTHORITY SIGNATURE	DATE APPROVED
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