



ETAIROS
HVAC

FLEET SAFETY PROGRAM
UPDATED MAY 2022

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Summary

It is the policy of the company that our passenger vehicles (including vans and light-duty trucks) will be used only for company business and will be operated only by authorized persons who meet the driver criteria in our vehicle safety program.

This policy applies to our company-owned vehicles and private or rental vehicles authorized for use on company business.

All employees must comply with federal, state and local laws and policies and be “job-ready” when they are on company business. Job-ready means that employees must be physically and mentally able to do their jobs. Employees must not use intoxicants, drugs or medications that could impair their judgment or ability to drive. Managers and supervisors have the right to determine an employee’s job readiness.

Employees who drive on company business must have a valid drivers’ license and a satisfactory driving record.

Violations of this policy may result in revocation or restriction of employee authorization to drive a company-owned or private vehicle on company business, reassignment, demotion, suspension or dismissal.

All employees must sign a statement stating that they have read and understand this policy and the consequences for violating it.

Employee responsibilities

Employees who drive on company business must adhere to all parts of this policy. They must do a walk around inspection of any vehicle before driving it and they must not use a company vehicle for personal business unless it is approved, in writing by the Fleet Coordinator.

When operating company vehicles, employees should remember that their driving habits reflect on all company employees. Company vehicles must be used legally, courteously and safely.

Employees are strongly encouraged to plan mini-breaks every two hours during long periods of driving and to allow for no more than 10 hours driving per day in good driving conditions.

Employees must use and require seat belts to be worn by their passengers.

Smoking is not permitted in company vehicles.

Employees are responsible for the care of vehicles assigned to them and may be held liable for improper care and abuse of the vehicle. Misconduct could lead to withdrawal of driving privileges and/or disciplinary actions, up to and including dismissal.



Employees who drive on company business must have a current, valid license for the vehicles they drive. Licenses will be photocopied and kept in employees' files.

Requirements for new employees

New employees who drive on company business must read and sign an *MVR consent form* that permits the company to complete a motor vehicle background check.

The Fleet Coordinator will review this vehicle safety policy with each new employee who drives on company business.

Use of personal vehicles for company business

The Fleet Coordinator must review and approve use of a personal vehicle for company business.

Employees who drive personal vehicles on company business must provide evidence of automobile liability insurance as required by the state. A current certificate or proof of insurance must be kept in the employee's file.

This company does not provide liability insurance for employees who use their own vehicles on company business. Employees who use their personal vehicles on company business are responsible for all liability resulting from use of their vehicles.

Any employee who drives a personal vehicle on company business and who does not maintain insurance coverage on that vehicle will be reassigned to a non-driving position or, if a non-driving position is not available, will be terminated.

Motor vehicle record (MVR) review

The Fleet Coordinator will review the driver's MVR annually and score it using the company developed driver standards for vehicle incidents and violations.

Radar Detectors

Any vehicle driven for business purposes is prohibited from having radar or laser detection equipment as it promotes unsafe actions. Employees will face a loss of driving status if found using detection equipment.

Reporting incidents involving motor vehicles

An incident report packet is located in the glove box of each company vehicle. The packet contains instructions on what to do in case of an incident. Drivers should become familiar with the instructions before using vehicles.

Employees or their supervisors are responsible for completing and filing all necessary reports within the time periods required by this policy. Failure to file a report may cause the loss of the employee's driving privileges.



Employees must immediately notify their supervisor of any accident, collision or vandalism.

Employees or their supervisors must immediately report to the Fleet Coordinator all collisions, accidents, or vandalism involving vehicles they use on company business.

If the incident results in injuries or fatalities, employees or their supervisors must report them to the Fleet Coordinator immediately after ensuring the injured have or will receive necessary medical treatment.

Employees or their supervisors, must forward copies of all vehicle accident forms to the Fleet Coordinator within 24 hours of the accident.

Employees involved in vehicle crashes should discuss details of the incident *only* with police officers, appropriate state officials, or representative of the company's insurance carrier. Drivers are prohibited from signing or making any statements regarding responsibility for vehicle crashes.

Department of Transportation (DOT) regulated vehicles

Any vehicle traveling across state lines with a gross vehicle weight rating over 10,000 lbs (including any towed items or actual weight of vehicle and any tows) is subject to DOT regulations. Each driver must have a DOT compliant Driver File maintained by the Fleet Coordinator before being allowed to drive vehicles within this classification.

In addition to a DOT compliant driver file, any driver of a vehicle with a gross vehicle weight rating (including tows) over 26,000 lbs. (or actual weight of vehicle and any tows) must possess a valid commercial driver's license and be in compliance with DOT regulations.

Any vehicle carrying hazard materials at a level to which placarding is required under DOT regulations (regardless of the vehicle's gross vehicle weight rating or actual weight) must possess a valid CDL license with hazardous materials endorsement.

The Fleet Coordinator will be responsible for evaluating the applicability of DOT regulations to this company's operations and ensure compliance with those regulations. All drivers of DOT regulated vehicles will have responsibilities beyond those outlined in this policy and will receive additional training and information.

Drivers under the age of 21 are prohibited from operating vehicles or trucks that transport hazardous materials.

Driving Standards for screening employees driving records.

This company uses the following standards to screen employees' driving records over the past 36 months for violations and at fault accidents.

- **2 non-serious moving violations/at fault accidents:** Employee will receive a letter of reprimand.



- **3 non-serious moving violations/at fault accidents:** Employee will receive a letter of reprimand and be suspended without pay for one day and must successfully complete a driver improvement course.
- **4 or more non-serious moving violations/at fault accidents:** Employee will either be reassigned to a non-driving position if available, or, if a non-driving position is not available, the driver will be terminated. Before reinstatement to a driving position, the employee will be required to successfully complete a driver improvement course and follow the procedures as outlined in the *Re-qualification* section of this policy.
- **1 or more serious moving violations:** Employee will either be reassigned to a non-driving position if available, or, if a non-driving position is not available, the driver will be terminated. Before reinstatement to a driving position, the employee will be required to successfully complete a driver improvement course and follow the procedures as outlined in the *Re-qualification* section of this policy.

Non-Serious moving violations to include but not limited to:

- Fatigue, falling asleep at the wheel.
- Exceeding posted speed limit less than 20 MPH over posted speed.
- Following too closely (tailgating).
- Failing to signal intentions.
- Failing to Yield Right of Way
- Improperly backing the vehicle.
- Disregarding stop signs or signals.
- Improper lane changes.

Serious moving violations to include but not limited to:

- Committing involuntary manslaughter or criminally negligent homicide.
- Attempting to elude a law officer, or hit/run.
- Operating a vehicle while operator's license is suspended or revoked.
- Operating vehicles under the influence of alcohol or drugs.
- Reckless or careless driving
- Speed contest or racing
- Any other conviction that shows a significant disregard for traffic safety.



Employees under 25 may be held to stricter driver standards at the discretion of the Fleet Coordinator based on driving performance and years of experience driving.

Monitoring of GPS devices on company owned service trucks

This company uses GPS devices to monitor the driving behaviors employees driving company owned vehicles. Supervisors will review records monthly and notify any employees of driving issues. The company will use the following standards for monitoring these vehicles:

- Any employee who exceeds the speed limit by more than 10 miles per hour for more than 3 miles (allows for passing on two lane highways) will receive a warning in writing.
- Repeat offenders in a 365-day period will be suspended for 1 week without pay.
- 2nd time repeat offenders in a 365-day period who have already served a 1-week suspension will serve a two week suspension and be required to successfully complete driver safety school.
- Third time offenders in a 365-day period will be terminated.

Re-qualification for employees who have poor driving records

Employees who have been reassigned to non-driving positions for poor driving records may apply to re-qualify after 6 months under the following conditions:

- Employees must send a written request to the Fleet Coordinator stating why they should be re-qualified. Re-qualification requires the Fleet Coordinator's approval.
- Employees must also complete a driver improvement class which may include remedial and behind-the-wheel training before resuming their driving duties.

Pre-trip walk-around inspections

Employees are responsible for conducting walk-around inspections of their vehicles before driving each day or shift and note any defects or damage. Employees must also note defects or damage to seats, seat belts, interior lights, engine warning lights, rearview mirrors and emergency equipment.

Employees must report defects or damage to the Fleet Coordinator immediately. The Fleet Coordinator will evaluate the report and ensure that all hazards are repaired promptly. Vehicles that are unsafe to drive must be placed out of service immediately.



MVR Consent Form

The company will obtain and review the Motor Vehicle Record (MVR) on each employee where driving is a part of their job description. The MVR will be reviewed annually in order to evaluate that individual driver performance is within the parameters set by company management. However, the employee should also be responsible to report to management any changes that may have occurred.

Driver selection and discipline criteria are administered established based on driving records, the outcome of the annual review, the driving exposure, and the losses experienced during the three (3) years.

I understand that it is my responsibility to operate company vehicles safely and follow the requirements of the company vehicle safety policy. I also understand that the company will periodically review my motor vehicle record (MVR) and assess my eligibility to drive a motor vehicle on company business.

I authorize the company to obtain my MVR. This authorization remains valid as long as I am an employee or employee candidate and may only be rescinded in writing.

Employee's signature: _____

Driver's license number and state issued: _____

Employee's signature and date: _____

Reviewer's signature and date: _____



Distracted Driver Agreement

Safety is an important goal of the company and your support of this goal includes avoiding activities that may be considered distractions while operating any vehicle for business purposes. This may include, but is not limited to: eating, over-reaching for stored materials, reading paperwork, or using electronic equipment. Our company encourages drivers to use good judgement and not be distracted while operating motor vehicles.

Your primary responsibility when driving a motor vehicle for our organization is driving the vehicle safely.

Standards for employees operating company vehicles.

- Mobile communication devices are not to be used while the vehicle is in motion. This includes phones, PDAs, tablets, or any device that can transmit and receive calls, texts messages, emails, or access the internet. The use of headsets, two-way radios, or equipment with push-button communication ability is also restricted and should be used only while the vehicle is pulled over and safely parked. Any calls received while driving should be sent to voicemail to be retrieved once the vehicle is pulled over or parked.
- Notify clients, co-workers, and other regular callers the times when you may be unavailable to respond because you will be driving. Changing your outgoing voicemail greeting to reflect your unavailability because of driving is best practice.
- Utilize passengers to make and return calls and respond to messages while driving as long as this doesn't interfere with the driver's ability.
- There will be no usage of other electronic equipment such as laptops, cameras, GPS, pagers, and tablets while the motor vehicle is in motion. GPS information will be entered while the vehicle is safely parked.
- During emergency situations an exception can be made to contact police or seek medical assistance by dialing 911. If emergency calls must be made try keep them brief and attempt to pull over to the side of the road.

I have read and will comply with this distracted driving agreement.

Employee's signature and date: _____



Vehicle Use Agreement

Employee Name:

License number:

State issued:

Using company-owned vehicles

- Employees and passengers must wear seat belts while the vehicle is in motion.
- Drivers should not be fatigued or under the influence of any perception altering substances such as drugs and alcohol.
- Traffic laws should be followed at all times. Traffic flow and inclement weather should be taken into consideration and following distances should be extended if conditions deem it necessary.
- The vehicle must be maintained in accord with the company's maintenance requirements. Employees must report all mechanical problems to their supervisors immediately.
- Employees must report any motor vehicle incident that results in damage, injury, or a citation to their supervisors immediately.
- Employees must have a valid driver's license for the vehicles they will operate, must follow all license restrictions, and must have their license in their possession when they are driving. A driver whose license is suspended, revoked or terminated will notify the company immediately.
- Company vehicles will be operated only by their assigned driver or individuals specifically authorized by the company. Friends, unauthorized co-workers, and family, including children or a spouse, will not be allowed to drive our vehicles at any time without permission from the company.
- Hitchhikers are not permitted in company vehicles.
- Employees are responsible for all traffic and parking violations they receive when using company vehicles.
- Modifying or adding accessories to a company vehicle is prohibited.
- Radar detectors are prohibited.
- Employees are not allowed to operate vehicles at any time while under the influence of alcohol or drugs.
- Technicians using company service trucks are not permitted to use the vehicle for any work other than company business. Using a company service truck for 'moonlighting' jobs is strictly prohibited.

Using personal vehicles for company business



Authorization to use a personally owned vehicle for company business is permitted under the following conditions:

- Employees and passengers must wear seat belts while the vehicle is in motion.
- Employees must have the appropriate license to operate their vehicles.
- Employees must provide proof of insurance upon hire and each time their policy is renewed or updated.
- Employees must provide a copy of their insurance certificates to their supervisors.
- Employees must notify this company of all vehicle accidents or violations involving vehicles driven on company business.
- This company is authorized to review the driver's MVR annually as long as the driver is a company employee.
- The vehicle owner is responsible for mechanical repairs.
- Employees are not allowed to operate vehicles while under the influence of alcohol, drugs, or other medications that could impair their ability to drive safely.
- Employees must comply with all state and federal laws and regulations at all times.

I have read, understand, and agree to comply with this Vehicle Use Agreement.

Employee's signature and date: _____



Vehicle Accident Investigation Report -Supervisor Form

Part I - General information

1. Location	2. Driver Name	3. Department	4. Age
5. Date of Accident	6. Time AM PM	7. How long has driver been employed? Years: Months:	

8. Exact Location of Accident

9. Diagram Accident

Use one of these outlines to sketch the scene of the accident. Write in street or highway names or numbers.

Number your vehicle as 1. The other vehicle as 2 and additional vehicles as 3, 4, etc.

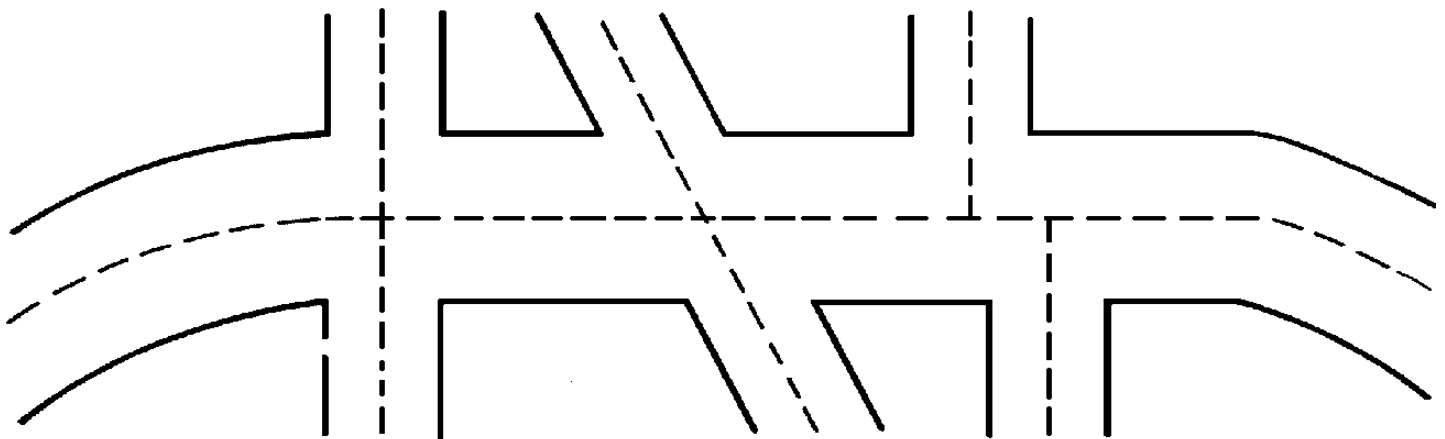
Example: → 1 2 ←

Use solid line to show path
before accident ———→ 2
and broken line after
the accident - - - - -→ 2

Show railroad by + + + + +

Place arrow in
this circle to
indicate *NORTH*

Show pedestrian by → ○



10. List dates of all vehicle accidents by this driver in the past three years

Part II - Description of Accident (Describe what happened - who was involved - where - when - why - how)

11. Describe the accident



Part III - The Cause of the Accident (also complete page 2 of this form)

12. What did our driver or any other employee do or fail to do, that contributed to this accident?

13. Did driver's physical condition (hearing, eye defects, sickness, lack of sleep,) cause or contribute in any way to the accident?

Yes No Explain

14. Did a vehicle's condition, scheduling, routing, maintenance, etc. Contribute in any way to the accident occurrence or to the resulting damage or injury? Explain:

Part IV - Corrective Action Taken

15. What is being done to prevent a re-occurrence? (Be specific. List definite steps taken. Avoid vague or meaningless answers such as "Told driver to be more careful," etc.)

Part V - Management Review

16. Preventable by Driver Yes No

Signature of Supervisor	Date
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Signature of Fleet Coordinator	Date
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Accident Investigation - Driver Statement

1. Name		2. Department	
3. Date of Accident		4. Time	AM PM
5. Exact Location of Accident			
6. Describe the accident (Describe what happened - who was involved - where - when - why - how)			
7. What could have been done to avoid the accident?			
Signature of Driver Date			



Accident Investigation - Witness Statement

1. Name		2. Department	
3. Date of Accident		4. Time	AM PM
5. Exact Location of Accident			
6. Describe the accident (Describe what happened - who was involved - where - when - why - how)			
7. What did our driver or any other employee do or fail to do, that contributed to this accident?			
Signature of Witness			
Date			



Driver Orientation Checklist

The Driver Orientation Checklist should be completed and documented for all new employees hired by (Company Name) who will be operating a company vehicle or personal vehicle for Etairos HVAC. The checklist provides a guideline to the fleet safety program.

1. Driver's Application
2. Driver's Interview
3. Obtain copy of Driver's License
4. Obtain & review copy of Motor Vehicle Record (MVR)
5. Evaluate Employee's MVR record to company MVR policy
6. Non-owned auto documents (copy of insurance-proof of insurance)
7. Physical (If company requires)
8. Drug test verification (if applicable)
9. Provide and review a copy of Fleet Policy (Include all policies & obtain sign off Acknowledgements)
 - Rules and Responsibilities
 - Accident Procedures
 - Distracted Driving Agreement
 - MVR Consent Form
 - Vehicle Use Agreement
 - Personal Use Policy
10. Review and discuss maintenance and repair procedures
11. Review and discuss vehicle accident procedures

Fleet Coordinator: _____

Date: _____



Vehicle Inspection Checklist- Non DOT Vehicle - Large Fleet

Date:

Location:

Vehicle Number:

Mileage:

Inspection Items:

<p>No Fuel, Oil or Water leaks</p> <p>Electronics</p> <ul style="list-style-type: none"> <input type="checkbox"/> Headlights <input type="checkbox"/> High Intensity <input type="checkbox"/> Brake Lights <input type="checkbox"/> Reverse lights <input type="checkbox"/> Turn Signals <input type="checkbox"/> Horn <input type="checkbox"/> Speedometer <p>Instrument – Gauges</p> <ul style="list-style-type: none"> <input type="checkbox"/> Fuel level <input type="checkbox"/> Oil Pressure <input type="checkbox"/> No Red Warning Lights <p>Tires and Rims</p> <ul style="list-style-type: none"> <input type="checkbox"/> Tire Pressure <input type="checkbox"/> Tread Depth <input type="checkbox"/> No cuts, bulges or Tears <input type="checkbox"/> Battery <p>Check Fluid Levels of:</p> <ul style="list-style-type: none"> <input type="checkbox"/> Engine Oil <input type="checkbox"/> Brake Fluid <input type="checkbox"/> Clutch Fluid <input type="checkbox"/> Power Steering Fluid <input type="checkbox"/> Steering Fluid <input type="checkbox"/> Transmission Fluid <p>Check Fluid Levels of:</p> <ul style="list-style-type: none"> <input type="checkbox"/> Radiator Coolant <input type="checkbox"/> Radiator Cap is Closed <input type="checkbox"/> Battery Fluid <input type="checkbox"/> Windshield Wiper/washer Reservoir 	<p>Vehicle Body</p> <ul style="list-style-type: none"> <input type="checkbox"/> No Damage <input type="checkbox"/> Load Security <input type="checkbox"/> Lights and Reflectors Clean <p>Windshield/Windows/Wipers</p> <ul style="list-style-type: none"> <input type="checkbox"/> Windshield Wipers <input type="checkbox"/> Windshield Clean and Unobstructed <input type="checkbox"/> Windshield not Cracked <input type="checkbox"/> Windows not Cracked <p>AC-Heater – Defroster</p> <ul style="list-style-type: none"> <input type="checkbox"/> Air Conditioning Working <input type="checkbox"/> Heater Working <input type="checkbox"/> Defroster Working <p>Seats, Seat Belts & Mirrors</p> <ul style="list-style-type: none"> <input type="checkbox"/> Driver's seatbelt <input type="checkbox"/> Passengers Seatbelt <input type="checkbox"/> Headrests <input type="checkbox"/> Mirrors <p>Emergency Equipment</p> <ul style="list-style-type: none"> <input type="checkbox"/> Jack and Accessories <input type="checkbox"/> High Visibility Jacket/Vest <input type="checkbox"/> First Aid Kit <input type="checkbox"/> Hazard Warning Triangle <input type="checkbox"/> Accident Kit <p>Trailer (if applicable)</p> <ul style="list-style-type: none"> <input type="checkbox"/> No Damage <input type="checkbox"/> Brake Hoses <input type="checkbox"/> Electrical Connections <input type="checkbox"/> Coupling Security
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Employee's signature and date: _____



Vehicle Inspection Checklist- Non DOT Vehicle - Small Fleet

Date:

Location:

Vehicle Number:

Mileage:

Inspection Items:

<input type="checkbox"/> Headlights	<input type="checkbox"/> Tires and Rims
<input type="checkbox"/> Tail Lights	<input type="checkbox"/> Mirrors
<input type="checkbox"/> Brake Lights	<input type="checkbox"/> Windshield Clean and Not Cracked
<input type="checkbox"/> Directional Signals	<input type="checkbox"/> Other Windows Clean and Not Cracked
<input type="checkbox"/> Horn	<input type="checkbox"/> Wipers Working & in Good Condition
<input type="checkbox"/> Speedometer	<input type="checkbox"/> Seat Belts
<input type="checkbox"/> Brakes	<input type="checkbox"/> Heater-Defroster-Air Conditioning
<input type="checkbox"/> Battery	<input type="checkbox"/> First Aid Kit
<input type="checkbox"/> Radiator and Hoses	<input type="checkbox"/> Fire Extinguisher
<input type="checkbox"/> Instrument Gauges Working	<input type="checkbox"/> Emergency Warning Equipment
<input type="checkbox"/> Vehicle Emergency Lighting (Flashers)	<input type="checkbox"/> Jack and Accessories
<input type="checkbox"/> Emergency Brake	<input type="checkbox"/> Vehicle Body Condition
<input type="checkbox"/> No Oil - Water Leaks	<input type="checkbox"/> Accident Reporting Kits

Employee's signature and date: _____

