

**NEVADA DEPARTMENT OF WILDLIFE
Authorization to Use Private Vehicle**

Employee requesting authorization to use private vehicle:	
Travel Dates From: _____ To: _____	Destination: _____
Explanation/Justification: _____	
Indicate: _____ Employee or _____ Employer Convenience	
Evaluation of estimated expenses by travel method other than Department vehicle: Air Coach: \$ _____ Motor Pool (if Department vehicle is not available): \$ _____ Personal Vehicle: _____ miles x _____ rate = \$ _____	
<p>ATTESTATION:</p> <p>The employee understands that if extra time is involved as the result of using a private vehicle, as opposed to flying or using an agency vehicle, that the employee will:</p> <ol style="list-style-type: none"> 1. Be on annual leave, compensatory time off, or personal leave for the extra travel time; and 2. Not claim meals and other travel expenses en route that would not be incurred if using air travel or an agency vehicle, provided that air travel would, all things considered, be the least expensive and most efficient means of travel. <p>There are serious implications involved if an employee is involved in an accident in their personal vehicle that need to be considered:</p> <ol style="list-style-type: none"> 1. The State's insurance policy does NOT extend to or over an employee's personal vehicle in the event of an accident. Any damage claims are, therefore, charged to the employee's personal insurance coverage. 2. Similarly, the State's blanket policy does not indemnify an employee in the event of bodily injury resulting from a traffic accident while operating their personal vehicle, even if on official business. The employee should check their personal coverage for any restrictions or limitations when using a personal vehicle for official business. <p>I, _____, have read and understand the above restrictions and implications of using my personal vehicle for official business and hold harmless the Department should I be involved in a vehicle accident.</p> <p>Date: _____</p>	
Supervisor and Bureau Chief/Division Administrator signatures indicate that there is approval and sufficient budget authority to cover the travel expense for use of the employee's personal vehicle.	
Immediate Supervisor Approval and Signature: _____	Date: _____
Division Chief Approval and Signature: _____	Date: _____
Director or Deputy Director Approval and Signature: _____	Date: _____