

GOVERNMENT OF THE DISTRICT OF COLUMBIA

ADMINISTRATIVE ISSUANCE SYSTEM

Mayor's Order: 2009-160
September 23, 2009

SUBJECT: Government and Personal Vehicle Operators Accountability Policy

ORIGINATING AGENCY: Office of the Mayor

By virtue of the authority vested in me as Mayor of the District of Columbia by section 422(6) and (11) of the District of Columbia Home Rule Act of 1973, as amended, 87 Stat. 790, Pub. L. No. 93-198, D.C. Official Code § 1-204.22(6) and (11) (2009 Supp.), it is hereby **ORDERED** that:

- I. The head of each agency shall implement and maintain a system of managing the use of vehicles for authorized government business that ensures safe operation of government vehicles; maximum compliance with laws and regulations governing operation of any vehicle while on authorized government business; accountability of operators for notices of infraction received as a result of operating any vehicle on government business or having assigned custody of a government vehicle; complete knowledge of the nature of vehicle assignments and custody; and appropriate operator qualification and training for vehicles operated. Each agency head shall incorporate this system into a written policy and submit this policy to the Director of the Office of Risk Management (ORM) for review and approval prior to its implementation.
- II. The head of each agency shall submit to the Directors of the Department of Motor Vehicles (DMV), the Department of Public Works (DPW), and ORM the name, work address, email address, and telephone number of its Fleet Certifying or Fleet Coordinating Official (FCO) responsible for managing the agency's vehicles and other transportation resources by January 2nd of each calendar year. Whenever there is a change in the FCO, the agency head shall immediately notify DMV, DPW, and ORM in writing with the new information.
- III. The FCOs shall establish and maintain a fleet registry of all vehicles assigned to their agency. The registry shall identify each vehicle's tag number, make, model and year, and shall include the status of the vehicle (leased or owned). If leased, the name, address, and contact information of the leasing company shall be provided.
- IV. The FCO shall submit to DMV information about the agency's fleet that DMV requires for the operation of its Government Multi-Owner Fleet Program. This

program enables DMV and District agencies to track citations for parking and other violations issued with respect to District government vehicles.

- V. Each agency's system of managing the use of vehicles for authorized government business shall include, at a minimum, the following requirements:
- A. The agency shall not permit an employee to use a government or privately owned vehicle for District government business without the agency's advance written authorization. The agency may authorize an employee to use a government or privately owned vehicle for work activities that are within the scope of his or her employment. For the purposes of the Order, and for all agency authorizations, use of a vehicle for District government business shall be limited to use that is within the employee's scope of employment. Unless the agency otherwise expressly provides in writing, an employee is not performing District government business or acting within the scope of his or her employment while driving to or from work. The agency shall prohibit employees from transporting non-District government employees while using government or privately owned vehicles for District government business, unless transporting non-District government employees, such as agency clients, is one of the employee's job responsibilities, is permitted by agency policy, and is expressly authorized in writing. The agency may provide advance written authorization to an employee to use a government or privately owned vehicle for District government business on an annual or per trip basis. The FCO shall maintain copies of all written authorizations.
 - B. The agency shall maintain a daily record of who has custody of each agency-controlled government vehicle at all times, miles driven, purpose of the custody or use, physical condition before and after assignment, and reported accidents, incidents, citations or summons occurring during assignment.
 - C. The agency shall maintain documentation of the details of any employee's use of a personal vehicle for District government business, including the name of the employee, the make, model, tag number and year of the vehicle, the date and time of the use, the purpose of the use, and any reported accidents, incidents, citations or summonses occurring during the use.
 - D. The agency shall require each employee who is authorized to operate a vehicle on District government business to annually execute a Vehicle Operator's Acknowledgement Form. (See Attachment 1.) By signing this form, the employee commits to operating the vehicle in accordance with District of Columbia traffic regulations, and to complying with legal requirements for answering, adjudicating and paying tickets identified as issued while the vehicle is in his or her possession, while the vehicle is

assigned to him or her for use, or if privately owned, while used by the employee for District government business.

- E. The agency shall require each employee who operates a District government or privately owned vehicle while conducting District government business to comply fully with the Distracted Driving Safety Act of 2004, effective March 30, 2004 (D.C. Law 15-124; D.C. Official Code § 50-1731.01 *et seq.*), and DPW Department Order No. 2004-04, as they are in effect on the date of this Order and as they may be amended from time to time. The agency shall prohibit employees from driving while distracted, which includes using a mobile telephone or other electronic device while operating a moving motor vehicle in the District of Columbia unless the device is equipped with a hands-free accessory.
- F. The agency shall require each employee who operates a District government or privately owned vehicle while conducting District government business to maintain a valid driver's license and to have this license in his or her possession while on duty and operating the vehicle.
- G. The agency shall require each employee to provide an agency-designated manager or supervisor with a copy of his or her valid driver's license, and any additional information required for license verification, upon assuming a position in which he or she is required or authorized to operate a District government or privately owned vehicle while conducting District government business. Each such employee shall be required to provide a copy of his or her driver's license and any accompanying information each year thereafter in conjunction with the employee's annual performance evaluation, and otherwise at the request of the agency. The agency may also require the employee to provide verification of his or her out-of-District driver's license and driver's record.
- H. The agency shall send a copy of the employee's driver's license and any accompanying information to ORM. ORM shall submit this information to DMV or the Metropolitan Police Department (MPD) to verify the status of the employee's driver's license and official driver's record. DMV shall advise ORM of the results of this verification for all District of Columbia, Maryland, and Virginia driver's license holders. MPD shall verify driver's licenses issued by all other state jurisdictions. ORM shall provide each agency FCO with the results of these verifications and the FCO shall maintain a record of each employee's driver's license, driving record, and the results of the verification provided by DMV, MPD, or the employee.
- I. The agency shall require each employee to immediately, and no later than the next scheduled work day, notify an agency-designated manager or supervisor of any change in his or her driver's license status. Failure by an employee to timely report a change in driver's license status may result

in disciplinary or administrative action. The FCO shall maintain a record of this information, and the agency shall promptly provide this information to ORM.

- J. If an employee's driver's license or driver's record fails to comply with applicable requirements for the lawful operation of a vehicle, the agency shall revoke the employee's privilege of driving a District or personal vehicle for District government business. This revocation shall be in addition to any other action that may be taken by the agency.
- K. The agency shall require all employees who operate commercial vehicles to have in their possession a valid and appropriate Commercial Driver's License (CDL) in the course of their job duties. Agencies shall abide by Section 391.25 of the Federal Motor Carrier Safety Regulations for annual review of each employee commercial motor vehicle operator's license or permit to ensure compliance with federal Motor Carriers Safety Regulations and Hazardous Materials regulations. Employees are required to self report at least once every twelve (12) months, on all violations of motor vehicle traffic laws and ordinances (other than parking violations) of which the driver has been convicted or on account of which the driver has forfeited bond or collateral during the preceding twelve (12) months. This reporting shall be in addition to any other reporting required by federal or District law, or District government policy (including any policy of the employee's agency).
- L. The agency shall only allow an employee to operate one personal vehicle for District government business and shall require the employee to provide a copy of the vehicle registration for this vehicle to an agency-designated manager or supervisor before using the vehicle for District government business. The FCO shall maintain copies of the current registrations for all authorized personal vehicles, and the agency shall forward a copy of each registration to ORM. The agency shall notify ORM immediately of any changes in vehicles.
- M. The agency shall require an employee who operates a privately owned vehicle while conducting District government business to provide an agency-designated manager or supervisor with proof of automobile insurance coverage (declaration page) for the vehicle and proof of compliance with all registration, inspection, and other requirements applicable to the vehicle at the same time as the employee provides a copy of his or her driver's license. If there is a change in status of automobile insurance coverage or compliance with other requirements, the employee shall be required to notify the agency-designated manager or supervisor within three (3) business days of receipt of notice of the change. The FCO shall maintain a record of this information, and the agency shall provide copies of these documents to ORM. If the agency authorizes an employee

to use a privately owned vehicle to transport non-District government employees, such as agency clients, as part of the employee's job responsibilities, the agency shall require the employee to maintain insurance coverage for these individuals.

- N. The agency shall require employees to report business use of privately owned vehicles to their insurance carrier, if not previously reported.
- O. The agency shall provide the employee with written notice that the allowance available for expenses associated with the operation of a personal vehicle for official business is limited to reimbursement for mileage at the applicable rate. The agency shall require employees to use the appropriate District form to document mileage and request reimbursement of the allowance.
- P. The agency's written notice shall also inform the employee that District government employees authorized to operate their personal vehicles for government business are covered by the District of Columbia Employee Non-Liability Act, approved July 14, 1960 (74 Stat. 519; D.C. Official Code § 2-411 *et seq.*), which generally provides that a District employee is not personally liable for property damage or personal injury to a third party resulting from a motor vehicle accident occurring while the employee is acting within the scope of his or her employment. The notice shall require the employee's agreement that the District government's liability for property damage to his or her personal vehicle shall be limited to any settlement the District may make of a claim made under the Military Personnel and Civilian Employees Claim Act of 1964 (Act), approved August 31, 1964 (78 Stat. 767; 31 U.S.C. § 3721). If an employee makes a claim under this Act and the loss did not result from the employee's negligent or wrongful conduct, ORM may, in its discretion and in accordance with the Act and any applicable rules, settle such a claim for an amount that does not exceed \$10,000. Finally, the notice shall specify that if the employee is injured while carrying out District government business, the employee shall be limited to making a claim under the Disability Compensation Program established by the District of Columbia Government Comprehensive Merit Personnel Act, effective March 3, 1979 (D.C. Law 2-139; D.C. Official Code § 1-623.01 *et seq.*).
- Q. The agency shall require the vehicle operator or custodian to immediately notify an agency-designated manager or supervisor of any accidents, incidents, citations or summons incurred while operating, or having custody of, a vehicle on authorized District government business. This information shall be forwarded to the FCO. With respect to tickets issued to employees driving government vehicles:

1. Each FCO shall, after receiving notification of outstanding ticket(s), respond to the tickets in one of two ways: by identifying those tickets eligible for administrative dismissal or by identifying by name, address and driver's permit number of the vehicle operator those tickets that will not be recommended for dismissal.
 2. Each FCO shall submit to DMV those tickets identified for administrative dismissal and those tickets that are eligible to be transferred to the operator of the vehicle within thirty (30) calendar days.
 3. Each FCO shall notify the vehicle operator of tickets that are not eligible for administrative dismissal and the appropriate procedure to address the ticket within fifteen (15) calendar days of receipt of notification of ticket(s).
 4. Each FCO shall notify drivers who are identified as responsible for a vehicle when an infraction is issued to the vehicle of the options for answering a ticket.
- R. The agency shall require the vehicle operator or custodian to submit a completed Motor Vehicle Accident Report Form to an agency-designated manager or supervisor no later than forty-eight (48) hours after an accident. (See Attachment 2.) The FCO shall maintain a copy of this form and the agency shall submit a copy to ORM within forty-eight (48) hours of receipt from the employee.
- S. The agency shall prohibit the use of District government vehicles for DMV driver's tests, except that DPW employees may use District government vehicles for CDL driver training and testing.
- T. ORM shall provide each Agency Risk Management Representative (ARMR) and FCO with a monthly report listing tickets issued to agency vehicles. The FCO shall have thirty (30) calendar days from the postmark date of the monthly report to respond to DMV. The FCO shall respond in one of two ways: identify those tickets eligible for administrative dismissal or identify by name and driver's permit number the vehicle operator for tickets that will not be recommended for dismissal.
- VI. The Director of ORM is hereby delegated the Mayor's authority to issue rules governing the settlement of employee claims for personal property damage or loss under the Military Personnel and Civilian Employees Claim Act of 1964, approved August 31, 1964 (78 Stat. 767; 31 U.S.C. § 3721). Settlement of these claims shall not exceed \$10,000 per occurrence.

- VII. This order shall supersede Mayor's Order 2001-85, dated June 12, 2001, in its entirety and shall supersede paragraph 6 of Mayor's Order 2000-75, dated May 11, 2000, to the extent of any inconsistency.
- VIII. **EFFECTIVE DATE:** This Order shall become effective immediately.


ADRIAN M. FENTY
MAYOR

ATTEST: 
STEPHANIE D. SCOTT
SECRETARY OF THE DISTRICT OF COLUMBIA

**GOVERNMENT OF THE DISTRICT OF COLUMBIA
VEHICLE OPERATOR'S ACKNOWLEDGEMENT FORM**

Operator's Name: _____

Driver's License #: _____

Agency: _____

Telephone Number: _____

Email Address: _____

I. Operation of a vehicle for government business

- A. Performance of my duties on behalf of the Government of the District of Columbia requires my operating a government or authorized vehicle on government business. I acknowledge that it is my responsibility to operate any government or authorized vehicle in a safe manner and in full compliance with the law. This includes regular use of seat belts, strict adherence to speed limits, traffic lights and signs, compliance with parking restrictions, and strict adherence to prohibitions and requirements for the prevention of distracted driving.
- B. I understand and agree that I am solely responsible for any notices of infraction received as a result of operating, or having custody of, a vehicle on District government business, including parking tickets, red-light camera tickets, and speeding tickets. I agree to answer any such notices of infraction within thirty (30) days of receipt. I agree to report any notices of infraction received as a result of operating, or having custody of, a vehicle on District government business, as well as any vehicular accidents to my designated supervisor or manager immediately. I agree to complete and submit the Motor Vehicle Accident Report Form to my designated supervisor or manager within forty-eight (48) hours of a vehicular accident.
- C. I agree to maintain a valid driver's license sufficient to permit me to operate a vehicle lawfully on District government business. I agree to provide a copy of my driver's license to my designated supervisor or manager annually and otherwise at my agency's request. I further agree to notify my designated supervisor or manager of any change in the status of my driver's license by my next scheduled work day. If my driver's license was issued by a jurisdiction other than the

District of Columbia, I agree to obtain verification of the status of my driver's license and my driving record from the issuing jurisdiction at my agency's request.

- D. I understand and agree that I may not transport non-District government employees in a government or privately owned vehicle while on District government business unless such transportation is permitted by agency policy and I have been expressly authorized in writing to do so by my agency. I further understand and agree that, unless my agency expressly provides otherwise in writing, driving to or from work is neither District government business nor within the scope of my employment.

II. Use of privately owned vehicles by District employees:

- A. I understand and agree that I may use a privately owned vehicle for District government business, within the scope of my employment, only at the discretion of and with the approval of my designated supervisor or manager. I understand that I may request a mileage allowance at the rate established under applicable law and regulations for the expenses associated with authorized use of a privately owned vehicle for District government business. I understand and agree that if I am involved in an accident while acting within the scope of my employment in the course of my official duties, my liability for personal injury and property damage to third parties will be governed by the District of Columbia Employee Non-Liability Act, approved July 14, 1960 (74 Stat. 519; D.C. Official Code § 2-411 *et seq.*). I further understand and agree that if I am injured while carrying out District government business, I am limited to making a claim under the Disability Compensation Program established by the District of Columbia Government Comprehensive Merit Personnel Act, effective March 3, 1979 (D.C. Law 2-139; D.C. Official Code § 1-623.01 *et seq.*). I understand and agree that the District's liability for property damage to my personal vehicle sustained incident to its authorized use for District government business shall be limited to any settlement the District may make of a claim made under the Military Personnel and Civilian Employees Claim Act of 1964 (Act), approved August 31, 1964 (78 Stat. 767; 31 U.S.C. § 3721). I understand and agree that the District may, in its discretion, settle such a claim in accordance with the Act and any applicable rules, for an amount that does not exceed \$10,000. I understand and agree that I will not receive compensation for property damage to my personal vehicle resulting from my own negligent or wrongful conduct.
- B. I agree that, if I am authorized to use a privately owned vehicle for government business, I shall identify and use only one vehicle for this purpose. I agree to maintain insurance coverage for this vehicle and for any non-District government employee I am authorized to transport and to report business use of this vehicle to the insurance carrier. I further agree to comply with all applicable registration, inspection and other requirements for the vehicle and to provide proof of compliance with these requirements, and of insurance coverage, to my designated

supervisor or manager annually and otherwise at my agency's request. I agree to notify my designated supervisor or manager of any change in the status of automobile insurance coverage or other requirements within three (3) business days of receipt of notice of such change.

I understand that failure to comply with the requirements stated in this notice may result in disciplinary or administrative action against me, up to and including termination of employment.

Signature: _____

Date: _____



DISTRICT OF COLUMBIA MOTOR VEHICLE ACCIDENT REPORT FORM

CLAIM CODE/PHONE #		AGENCY CONTACT INFORMATION			AGENCY	
DATE OF ACCIDENT	TIME OF ACCIDENT AM: PM:	LOCATION ACCIDENT OCCURED: <input type="checkbox"/> NE <input type="checkbox"/> NW <input type="checkbox"/> SE <input type="checkbox"/> SW _____ ft of _____ Street Street			STATE	
TYPE OF ACCIDENT (check one) __ 00 Collision of vehicles __ 01 Collision with fixed object __ 02 On board school bus __ 03 Boarding/Alighting __ 04 Pedestrian __ 05 Fatality	TRAFFIC CONDITIONS (check one) __ 00 Unknown __ 01 Heavy __ 02 Medium __ 03 Light	TRAFFIC CONTROLS (check one) __ 00 Unknown __ 05 Flashing Light __ 01 Yield Sign __ 06 Stop Sign __ 02 Signal __ 07 None __ 03 Officer __ 08 Other __ 04 Turn Restricted		ROAD SURFACE (check one) __ 00 Unknown __ 01 Concrete __ 02 Asphalt __ 03 Light __ 04 Gravel __ 05 Dirt __ 06 Other	ROAD CONDITION (check one) __ 01 Unknown __ 02 Repairing __ 03 Dry __ 04 Wet __ 05 Ice	
ROAD TYPE (check one) __ 00 Straight __ 05 Underpass __ 01 Curve __ 06 Ramp __ 02 Level __ 07 Bridge __ 03 Grade __ 08 Divided __ 04 Crest	LIGHT CONDITIONS (check one) __ 00 Unknown __ 01 Dawn/Dusk __ 02 Dark __ 03 Daylight	STREET LIGHTS (check one) __ 00 Unknown __ 01 Defective street light(s) __ 02 No street light(s) __ 03 Street light(s) on __ 04 Street light(s) off		WEATHER (check ALL that apply) __ 00 Unknown __ 03 Rain __ 01 Fog/Midst __ 04 Snow __ 02 Clear __ 05 Sleet		
Total # of Vehicles Involved: _____						
District Driver & Vehicle Information						
District Vehicle No. _____ # of Passengers in District Vehicle: _____ # of Passengers Injured in District Vehicle: _____						
District Operator (Last Name, First Name, M.I.) Age Sex Full or Part-time (FT or PT) Driver Injured: Yes No						
_____ _____ _____						
Drivers License # _____ License State: _____ Home Phone #: () _____ - _____ Cell Phone #: () _____ - _____						
Vehicle Model/Year Make Body Style Tag #/State/Year Vehicle Color Vehicle Damaged: Yes or No						
_____ _____ _____						
Speed at time of Impact: _____ mph Skid Mark Details: _____						
Vehicle Driven Away: Yes or No Vehicle left at scene: _____ Yes or No If towed, to where: _____						
VEHICLE TYPE (check one) __ 00 Passenger Auto __ 01 Bus __ 02 Truck __ 03 Trailer __ 04 Other __ 05 Heavy Equipment	PRIMARY CAUSE OF ACCIDENT: Insert ONE code from below for DISTRICT vehicle here: <input type="checkbox"/> Insert ONE code from below for CLAIMANT vehicle here: <input type="checkbox"/>					
DRIVER CONDITION (check ALL that apply) __ 00 Fatigued __ 01 Ill __ 02 Physical defect __ 03 Asleep __ 04 Normal __ 05 Unknown __ 06 Ability Impaired __ 07 Ability not impaired	__ 00 Speed __ 08 Flashing light __ 16 Other Defects __ 22 Defective light(s) __ 01 Defective brakes __ 09 Directional light __ 17 Pedestrian Violation __ 23 Pedestrian drunk __ 02 Signal __ 10 Stop Sign __ 18 Driver inattention __ 24 Road defects __ 03 Auto right of way __ 11 Alcohol influence __ 19 Changing lanes no caution __ 25 Road defects __ 04 Pedestrian right of way __ 12 Improper passing __ 20 Failure to set parking brake __ 26 Driver vision obstructed __ 05 Improper Turn __ 13 One way street-wrong way __ 21 Opened door in traffic __ 27 Other: _____ __ 06 Yield Sign __ 14 Wrong side of street __ 22 Drug influence _____ __ 07 Stop/Go light __ 15 Improper starting __ 23 Improper Backing _____					



DISTRICT OF COLUMBIA
MOTOR VEHICLE ACCIDENT
REPORT FORM

Claimant Information

Claimant (Last Name, First Name, M.I.) Age Sex Estimated Damage \$

Home Address Business Address

Drivers License #/State Home Phone #: () - Alternate Phone #: () -

Vehicle Model/Year: Tag #/State/Year:
Make: Vehicle Color:
Body Style:

Vehicle Damaged: Yes or No Speed at time of Impact: mph Skid Mark Details:
Was vehicle driven away? Yes or No Was vehicle left at the scene? Yes or No If towed, to where:
Tow Co. Info.

INJURY CODE (check ALL that apply) CLAIMANT CONDITION (check one)
00 Fatal 01 Disabling 02 Non-disabling 03 None 00 Fatigued 01 Ill 02 Physical defect
04 Unknown 05 No visible injury 06 complaint of pain/no visual injury 03 Asleep 04 Normal 05 Unknown
06 Ability Impaired 07 Ability not impaired

TYPE OF VEHICLE (check one):
00 Passenger Auto 01 Bus 02 Truck 03 Trailer 04 Unknown 05 Taxi 06 Motorcycle 07 Bicycle
08 Fire engine 09 Ambulance 10 Fixed Object 11 Vendor Cart 12 Other:

of Passengers in Claimant Vehicle: # of Passengers Injured in Claimant Vehicle:
Do you have Collision Insurance? Yes No Amount of Deductible \$

Additional Claimant Information

Claimant (Last Name, First Name, M.I.) Age Sex Estimated Damage \$

Home Address Business Address

Drivers License #/State Home Phone #: () - Alternate Phone #: () -

Vehicle Model/Year: Tag #/State/Year:
Make: Vehicle Color:
Body Style:

Vehicle Damaged: Yes or No Speed at time of Impact: mph Skid Mark Details:
Was vehicle driven away? Yes or No Was vehicle left at the scene? Yes or No If towed, to where:
Tow Co. Info.

INJURY CODE (check ALL that apply) CLAIMANT CONDITION (check one)
00 Fatal 01 Disabling 02 Non-disabling 03 None 00 Fatigued 01 Ill 02 Physical defect
04 Unknown 05 No visible injury 06 complaint of pain/no visual injury 03 Asleep 04 Normal 05 Unknown
06 Ability Impaired 07 Ability not impaired

TYPE OF VEHICLE (check one):
00 Passenger Auto 01 Bus 02 Truck 03 Trailer 04 Unknown 05 Taxi 06 Motorcycle 07 Bicycle
08 Fire engine 09 Ambulance 10 Fixed Object 11 Vendor Cart 12 Other:

of Passengers in Claimant Vehicle: # of Passengers Injured in Claimant Vehicle:
Do you have Collision Insurance? Yes No Amount of Deductible \$

