## APPLICATION FOR APPROVAL TO USE PRIVATE MOTOR VEHICLE FOR OFFICIAL PURPOSES

|  |  |  |
| --- | --- | --- |
| Name | College/Division | Classification |
| Vehicle Registration No | Make & Body Type | Engine capacity (cc) |
| Registration  Expiry Date | Comprehensive Insurance  Expiry Date | Driver’s Licence  Expiry Date |

##### **NOTE: Copies of documents verifying these dates MUST accompany each application**

|  |  |
| --- | --- |
| Period for which approval is sought:  From ……………. /20…. To ………………. / 20…..  **NOTE: Approvals LAPSE on 31 December** | Maximum kilometres/week: |
| Reason why it is necessary to make the journey/s: | |
| Is an official vehicle available? Yes/ No. If Yes, state why it is more efficient or economical to use your vehicle. | |
| Is interstate travel required (outside A.C.T and immediate surrounding regions)? Yes/No.  If Yes, has a Travel Approval Form been submitted and approved as part of the CIT Travel Policy and Procedures? | |

##### **Conditions for use of Private Vehicle**

1. I have ascertained that my comprehensive and compulsory third party policies cover me for damage.
2. If I am involved in an accident whilst driving my vehicle on official business I will still be required to meet any franchise payment in respect of the cost of any repairs under the conditions of my comprehensive insurance policy including the forfeiture of a “no claim” bonus, if appropriate.
3. If in any case the Institute is adjudged liable, in court proceedings against it, for damages arising out of any accident in which I might be involved whilst using my private motor vehicle for official purposes the Institute will claim against me for the recovery of any damages awarded against it.
4. Use of a private vehicle is permissible only when Institute vehicles are not available. Availability must be checked with a controller of Institute vehicles before any journey is undertaken in a private vehicle.
5. Claims are to be submitted monthly. Failure to submit claims promptly may result in non-payment.
6. Approval is for the above vehicle only. A separate approval is necessary for each vehicle used.

I have read the above conditions and agree to abide by them.

Signature of Applicant: …………………………………….. ……../………/20…….

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| RECOMMENDED / NOT RECOMMENDED I certify that the use of a private vehicle is essential for the efficient performance of the applicant’s duties.  Signature of Supervisor ………………………… ……/………/20……. |

|  |  |
| --- | --- |
| APPROVED / NOT APPROVED  Signature of Authorised Delegate ……………….………………………. ……../………/20…….. | Rate per km  (personnel use only) |

Original – Please send to Recruitment, CIT Human Resources, E112 CIT Reid for forwarding onto Shared Services for Processing

Copy – Kept with Director/Manager and Applicant

## Vehicle Running Sheet for Payment of Motor Vehicle Allowance

|  |  |  |
| --- | --- | --- |
| Name: | College/Division: | Classification: |

**Description of Vehicle**

|  |  |  |
| --- | --- | --- |
| Registration Number: | Make & Body Type: | Engine Capacity:  Rotary/Not Rotary |

**Particulars of journeys made on official business**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Date | From | To | Km’s | Reason for journey |
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**Total Kilometres:**

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| --- | --- |
| I certify that the particulars shown above are correct and claim reimbursement.  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ / /20  Claimant | I certify that the journeys listed were necessary for official purposes and are covered by approval.  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ / /20  Authorised Delegate |

NOTE: Please forward your vehicle running sheets along with a copy of your approval to Recruitment, CIT Human Resources, E112, CIT Reid for forwarding onto Shared Services for processing.