

AUTHORIZATION FOR OPERATION OF MOTOR VEHICLES AND/OR EQUIPMENT

(Supervisor completes. Must be supported by additional training documentation, as appropriate, for each type of motor vehicle or equipment authorized.)

Name of Operator:	Station:
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Type of authorization: New Renewal	
Operator <u>must</u> be either: Service employee [or] Volunteer (Must have Volunteer Services Agreement)	
Class of operator: Full-time operator Incidental operator Commercial operator	
Does operator carry a valid State license? Yes No** Regular [or] Commercial	
Does operator carry a valid agency identification card or document? Yes No**	
Is operator physically and medically qualified? Yes No** -- Explain	
Does operator's personal and Service driving record continue to demonstrate competence to operate the types of motor vehicles and/or motor equipment to which s/he is assigned? Yes No** -- Explain:	

** If "No" or "Failed" applies, this person is not permitted to operate motor vehicles or equipment for the Service.

Types of Motor Vehicles & Motor Equipment: *[Check those that apply. Attach safety training documentation. Unless required by supervisor, items marked with an asterisk (*) do not require safety training beyond basic State license.]*

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| Sedans*
Carryalls
Fire Trucks
Crawler Dozers
Power Excavator
Motor Graders
Skid Steers
Forklifts
Other: | Buses
Truck Tractors
Garbage Trucks
Crawler Loaders
Motor Cranes
Amphibious
Powered Lift
All-Terrain | Station Wagons*
Ambulances
Light Pickups*
4-WD Loaders
Farm Tractors
Soft Tracked
Weasels
Riding Mowers | Motorcycles*
Trucks w/attachments
Vans*
Draglines
Scraper Pans
Industrial Tractors
Thiokols |
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Additional Comments:

Supervisor's Authorization: I conclude that this employee/volunteer is fully trained and otherwise qualified to operate the motor vehicles or motor equipment checked above in a safe and effective manner. I hereby authorize such operation subject to the following conditions:

Supervisor's Name (Print): _____ **Signature:** _____ .20