



Chaffey College

VEHICLE SAFETY PLAN

Chaffey College
Office of Risk Management
5885 Haven Avenue
Rancho Cucamonga, CA 91737
www.chaffey.edu/risk-management

REVISION LOG

Review includes editing for grammatical or formatting errors and/or other small changes. Update indicates changes in content and a comment is required.

Date	Revised By	Approved By	Action Taken		Comments
			Review	Update	
8/10/2012	Danni Gilley	Susan Hardie	X		
7/1/2026	Nicole Leonard; Health & Safety Committee	Lisa Bailey	X	X	Complete plan review and reformatting of plan document

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PURPOSE

The purpose of this Vehicle Safety Plan is to establish requirements and procedures for the safe and authorized operation of vehicles used for District business.

INTRODUCTION

This Vehicle Safety Plan represents the Chaffey Community College District (“District”) administrative procedures regarding the use of vehicles for District business. Additional information may be found in the Governing Board Policy and Administrative Procedures at <https://www.chaffey.edu/policiesandprocedures/policies.php> (see [AP 6530](#), [BP 6520](#), [AP 6520](#), [BP 6540](#), and [AP 6540](#)).

Questions regarding the Vehicle Safety Plan may be directed to:

<i>Name</i>	<i>Title</i>	<i>Phone Number</i>	<i>Email Address</i>
Nicole Leonard	Interim Administrator, Risk Management	(909) 652-6523	nicole.leonard@chaffey.edu

DIVISION OF RESPONSIBILITIES

Related to this Vehicle Safety Plan, each of the following parties has specific responsibilities.

District Driver:

- Submit authorization request and receive clearance from Risk Management before operating any vehicle on behalf of the District
- Follow safe driving procedures and complete safety training(s) as required
- Immediately report safety concerns to supervisor/manager, Transportation department, and Risk Management
- Immediately report accidents and/or injuries to supervisor/manager, Transportation department, and Risk Management

Risk Management:

- Develop and maintain the Vehicle Safety Plan
- Receive and review Request to Operate District Vehicle forms
- Review and maintain DMV reports; inform Human Resources of criminal infractions
- Assign and document driver safety training
- Ensure changes to Board Policy and Administrative Procedures are communicated to campus community, as well as California laws and regulations regarding the use of vehicles

Transportation/Maintenance:

- Implement the Vehicle Safety Plan
- Process Transportation Requests (requests to use District vehicles), ensuring those who request to drive have been approved by Risk Management
- Perform and document safety inspections of District-owned vehicles prior to use
- Service/maintain vehicles in accordance with all vehicle laws and regulations

Supervisor/Manager:

- Communicate and enforce expectations on the safe operation of District vehicles
- Address and document employee safety concerns
- When injuries or incidents occur, submit a Supervisor's Incident Investigation Report form (Appendix C) to Risk Management immediately

USE OF DISTRICT VEHICLES

The District maintains vehicles to provide transportation in the most effective, efficient, and safe way possible for District employees in the performance of their duties.

District vehicles may only be used for District business – in the performance of, necessary to, or in the course of the duties of District employment. No District manager or employee shall use or permit the use of any District vehicle other than while conducting District business. Driving privileges may be revoked if misuse of District vehicle and/or unsafe driving is reported to the District.

Smoking is prohibited in any District vehicle.

AUTHORIZATION TO USE DISTRICT VEHICLES

Only those District drivers that have received authorization from Risk Management may operate a vehicle while conducting District business – whether a District vehicle as defined by this document or a privately-owned vehicle. Risk Management is responsible for determining:

- who meets the qualifying definition of a District driver
- who will be authorized to drive on official District business
- the types of vehicles they are qualified to use

DEFINITION OF DISTRICT DRIVER

A “District driver” is defined as individual who has been authorized by Risk Management to operate a vehicle for District business and meets all applicable criteria outlined in this document. This applies to all employee classifications, students, Governing Board members, and persons in a volunteer classification (e.g. a student volunteering to drive for a field trip or athletic event).

DEFINITION OF DISTRICT VEHICLE

A “District vehicle” is defined as a motorized device for land transportation that is owned, leased, or rented by the District. This definition includes utility/golf carts.

Motorcycles may not be used in carrying out District business, except for police motorcycles.

CRITERIA FOR VEHICLE USAGE

DISTRICT VEHICLES

Requests for authorization to operate District vehicles (including carts), must be submitted to Risk Management using the Request to Operate District Vehicle and/or Cart Form (see Appendix A).

Risk Management must determine whether the following criteria have been met before releasing a District vehicle to a driver or authorizing a driver to use a private or personal vehicle on official District business:

- Written approval of the use with authorization from the appropriate District manager
- Completion of District-approved safe driving course, as applicable
- Risk Management’s receipt of a copy of the individual’s driving record from the Department of Motor Vehicles
- Risk Management’s confirmation that the driver has met the criteria for vehicle operation
- The driver:
 - o is at least 18 years of age for carts, and 21 years of age for all other vehicles
 - o is eligible to be a District driver as defined by this document
 - o possesses a valid, unexpired California driver’s license
 - o possesses a driver’s license of the appropriate class for the type of vehicle requested

Parking

District vehicles must be parked/stored in a secure campus location when not in use. When being used for approved District business, it is reasonable to park a District vehicle in a secure off-campus location such as a hotel parking lot, parking garage, etc.

A District driver may request to park a District vehicle at their home when it is practical for conducting District business. Prior authorization must be received from Risk Management. On such occasions, the vehicle must be parked and secured off the street if feasible, or where the risks of accidental damage, theft, and vandalism are reduced.

PRIVATELY-OWNED VEHICLES USED FOR DISTRICT BUSINESS

District managers have the responsibility of directing individuals to drive privately-owned vehicles to conduct official District business. By operating a privately-owned vehicle for District business, the driver is certifying that the vehicle used is:

- Covered by liability insurance in amounts which are consistent with California law
- Adequate for the work to be performed

- Equipped with safety belts in operating condition
- In safe mechanical condition

When a privately-owned vehicle is used for District business, the owner's automobile insurance is primary to the District's liability insurance. For more information, see the "Insurance Requirements" section of this document.

TOLL ROADS AND EXPRESS LANES

District vehicles shall not be operated on toll roads, toll bridges, or express lanes that require payment of a fee, including FasTrak or similar toll systems. District drivers are responsible for planning travel routes in advance to avoid toll facilities when conducting District business.

The District will not reimburse toll charges incurred for the use of toll roads or express lanes in privately-owned vehicles used for District business.

Any use of toll facilities due to emergency conditions, detours, or other unavoidable circumstances must be reported to the driver's supervisor/manager and Risk Management as soon as practicable.

DRIVING RECORD REQUIREMENTS

When an individual's driving record does not meet the criteria of Risk Management, permission to drive District vehicles or on District business will be declined or revoked.

Any employee who is required to operate a District vehicle as part of their position must immediately notify Risk Management or the Office of Human Resources when the DMV or law enforcement agency has placed any restrictions on their driving privileges.

The following matrix is used to evaluate driver eligibility based on driving history, however the District reserves the right to decline or revoke driving privileges at any time.

		<i>Number of Accidents in the last 3 years</i>				<i>DUI or DWI Convictions</i>
		0	1	2	3	1 or more
<i>Number of Traffic Violations in the last 3 years</i>	0	Good	Acceptable	Borderline	Poor	Poor
	1	Acceptable	Acceptable	Borderline	Poor	Poor
	2	Acceptable	Borderline	Poor	Poor	Poor
	3	Borderline	Poor	Poor	Poor	Poor
	Major Violation*	Poor	Poor	Poor	Poor	Poor

Major Violations include, but are not limited to:

- Driving While Intoxicated (DWI) or Driving Under the Influence (DUI)
- Negligent Homicide, Vehicular Manslaughter, or Gross Negligence
- Driving on a Suspended or Revoked License
- Using a Motor Vehicle for the Commission of a Felony
- Aggravated Assault with a Motor Vehicle
- Operating a Motor Vehicle Without the Owner's Authority (Grand Theft)
- Permitting an Unlicensed Person to Drive
- Reckless Driving

INCIDENT REPORTING

ACCIDENTS AND COLLISIONS

District drivers involved in an accident while driving a District-owned vehicle, or a privately-owned vehicle on official District business, will make no comment or statement regarding the accident to anyone except police, Risk Management, or an identified representative of the District's insurance adjuster.

The driver of a District or privately-owned vehicle involved in an accident must record all pertinent information before leaving the scene of the accident. District vehicles contain the Vehicle Collision Report pamphlet (see Appendix B) and shall be used to gather this information. All motor vehicle accidents involving a District or privately-owned vehicle on District business must be reported immediately to the driver's supervisor/manager and Risk Management. The completed Vehicle Collision Report (see Appendix B) must be returned to Risk Management within 24 hours. Accidents resulting in bodily injury or significant property damage of others must be immediately reported to Campus Police at (909) 652-6911 or local law enforcement at 911.

DAMAGE TO VEHICLE

The driver of a District vehicle must immediately report all vehicle damage (whether minor or serious in nature) upon return of the vehicle to the Transportation department. The Vehicle Collision Report (see Appendix B) must be completed as it relates to the damage and returned to Risk Management.

MOVING AND PARKING VIOLATIONS

The driver of a District vehicle must report moving violations and/or parking violations incurred while in control of the District vehicle within 48 hours to the driver's supervisor/manager and Risk Management.

VEHICLE BREAKDOWNS

If a District vehicle breaks down, contact supervisor/manager and Risk Management to discuss replacement transportation and implementation of contingency plans.

INSURANCE REQUIREMENTS

A District driver's personal automobile insurance policy is the primary coverage for liability and damage in the event of an accident while on District business when the employee is driving their privately-owned vehicle (whether or not a District vehicle was available) or has personally rented a vehicle from an agency other than an agency contracted by the District.

Automobile liability coverage for vehicles owned and rented by the District is provided by Southern California Schools Risk Management Joint Powers Authority (SCSRM/JPA). Proof of insurance for District vehicles must be maintained in the vehicle at all times. If the evidence of insurance is not in a District vehicle you are operating, contact Transportation or Risk Management prior to vehicle use.

REVOCATION AND REINSTATEMENT

The District has the authority to grant, revoke, and reinstate driving privileges for District business.

REVOCATION OF DRIVING PRIVILEGES

Driving privileges may be revoked if the District receives information from the DMV that the driver is no longer licensed or if their license is suspended. Privileges may also be revoked if misuse of District vehicles or unsafe driving is reported to the District. Misuse of District vehicles includes, but is not limited to, the following conditions:

- Driving a District vehicle without authorization as defined by this document
- Driving without a valid California driver's license of the appropriate class for the type of vehicle being driven
- Permitting someone who is not an approved District driver to operate a District vehicle
- Engaging in unsafe practices, including failure to use, and to ensure that all passengers use, all available safety equipment (seat belts and/or shoulder harnesses) in the vehicle being operated
- Permitting more passengers than allowed by available safety equipment in the vehicle (e.g., if a passenger van has 10 available seat belts, the maximum number of occupants in the vehicle is 10)
- Falsification of safe driving training completion, accident reports, or other forms pertaining to the use of the vehicle
- Failure to promptly report a vehicle accident, damage caused to a District vehicle, moving violation while driving a District vehicle, or parking violation incurred while in control of the District vehicle
- Improper storage or parking of a District vehicle
- Personal use or transporting passengers other than those directly involved with and approved for District business
- Failure to comply with any state or Federal law or regulation, or policy regarding the use of District vehicles, including any requirements to have satisfactorily completed District-

approved driver safety training

Individuals who misuse District vehicles may be held personally liable for damages to third parties and associated legal costs, to the extent permitted by law. Drivers who misuse District vehicles may also be subject to disciplinary action.

REINSTATEMENT OF DRIVING PRIVILEGES

A driver may request to have their driving privileges reinstated by contacting Risk Management. Reinstatement may require the completion of driver training/re-training.

APPENDIX A

Request to Operate District Vehicle and/or Cart Form

<https://www.chaffey.edu/risk-management/docs/occupational/req-operate-form.pdf>



REQUEST TO OPERATE DISTRICT VEHICLE AND/OR CART

Completed forms should be sent to nicole.leonard@chaffey.edu for processing. Incomplete forms or forms sent without a driver's license copy will not be processed. Upon DMV clearance and completion of training (if applicable), the driver and supervisor will be notified via email. Questions? Contact Nicole Leonard at (909) 652-6523 or nicole.leonard@chaffey.edu.

REQUEST INFORMATION

Type: ☐ NEW Authorization ☐ CHANGE Authorization ☐ REMOVE Authorization
Use: ☐ District Vehicles only – Requires copy of CA driver's license and completion of safe driving training (will be
☐ District Carts only – Requires copy of driver's license and completion of [cart safety video](#)
☐ District Vehicles and Carts – Requires copy of driver's license, and completion of safe driving training & [cart safety video](#)

DRIVER INFORMATION

Driver Name (exactly as it appears on driver's license): _____
Last Name First Name
Driver's License # _____ State: _____ Date of Birth: _____
Position/Title: _____ Colleague ID: _____
Email Address: _____ Phone: _____
Department: _____ Supervisor: _____
Classification: ☐ Classified ☐ Faculty/Adjunct ☐ Management ☐ Professional Expert/Coach
☐ Short Term Worker/Apprentice ☐ Student Worker ☐ Volunteer ☐ Other: _____
Will driver need to operate a passenger van? ☐ No ☐ Yes
Is this authorization for an upcoming event/field trip? ☐ No ☐ Yes – Date(s) of event: _____

ACKNOWLEDGEMENTS

By signing below, **DRIVER** acknowledges the following:

- I have reviewed the "Use of District and Private Vehicles Plan."
- I will be added to the District's Employer Pull Notice (EPN) program with the Department of Motor Vehicles (DMV), which enables Chaffey College to monitor my driving record.
- (For Vehicle Authorization) Before operating a District vehicle, I must complete a safe driving training and HR must receive DMV clearance.
- (For Cart Authorization) I have reviewed the [cart safety video](#) and accept the responsibility for the safe operation of the cart on authorized pathways and parking locations.

Print Driver's Name _____ Driver's Signature _____ Date _____

By signing below, **SUPERVISOR** acknowledges that the department has a need for the individual named above to operate a District vehicle and/or cart. Supervisor also confirms the individual has completed the safe driving training and/or viewed the cart safety video, as applicable.

Print Supervisor's Name _____ Supervisor's Signature _____ Date _____

FOR HUMAN RESOURCES & RISK MANAGEMENT USE ONLY

Submitted to DMV:	Cleared:	Training assigned:	Completed:
Dept Notified:	HR Signature:		OTDT

APPENDIX B

Vehicle Collision Report Pamphlet (page 1)

<https://www.chaffey.edu/risk-management/docs/occupational/vehicle-collision-report.pdf>

DISTRICT VEHICLE

Driver

Driver's license Number

Vehicle Year, Make and Model

Vehicle license Plate

Area of Damage

Fully Explain How Accident Occurred

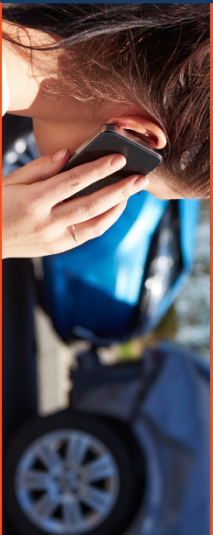
DIAGRAM

LIABILITY COVERAGE

This vehicle is owned by a public entity and is self-insured through the membership in a joint power authority pursuant to the California Government Code Section 16020 (B) (4) of the California Vehicle Code (CVC).

Vehicle Collision Report

CALIFORNIA SCHOOLS RISK MANAGEMENT



- Stop at once and warn other motorists by using car lights, flares, or a flashlight.
- Call the police. Summon an ambulance for injuries
- Obtain the name, address and phone # of all persons in the other vehicle(s)
- IMPORTANT - Obtain names, addresses and phone #s of all witnesses
- Obtain the license number and state of registration of the other vehicle(s)
- Take pictures of all vehicles involved from different angles
- Notify your supervisor of the collision immediately.
- Do not discuss the accident with anyone other than the police authority, your employer, or supervisor.
- COMPLETE THIS REPORT IMMEDIATELY and submit to Carl Warren and District office.
- DO NOT ADMIT RESPONSIBILITY, but do give the other party your name and address.

Address

School District

Supervisor's Signature

Driver Signature

Phone Number ()

Date of Collision

Location of Collision

Police Agency Called

Police Report #

Violations/Citations

Revision Date: 04/30/2024

Vehicle Collision Report Pamphlet (page 2)

<https://www.chaffey.edu/risk-management/docs/occupational/vehicle-collision-report.pdf>

OTHER PARTY	INJURED	WITNESSES
Name _____	Name _____	Name _____
Address _____	Address _____	Address _____
City _____ State _____ Zip _____	City _____ State _____ Zip _____	City _____ State _____ Zip _____
Home Phone _____ Work Phone _____	Home Phone _____ Work Phone _____	Home Phone _____ Work Phone _____
Driver's License _____	Nature of Injury Reported at Time of Accident ☐ District ☐ Other ☐ Automobile ☐ Pedestrian	
Automobile Year, Make and Model _____	Name _____	Name _____
License Plate _____	Address _____	Address _____
Area of Damage _____	City _____ State _____ Zip _____	City _____ State _____ Zip _____
Prior Damage _____	Home Phone _____ Work Phone _____	Home Phone _____ Work Phone _____
Number of Passengers _____	Nature of Injury Reported at Time of Accident ☐ District ☐ Other ☐ Automobile ☐ Pedestrian	
Insurance Company _____	Name _____	Name _____
Address _____	Address _____	Address _____
City _____ State _____ Zip _____	City _____ State _____ Zip _____	City _____ State _____ Zip _____
Phone Number _____	Home Phone _____ Work Phone _____	Home Phone _____ Work Phone _____
	Nature of Injury Reported at Time of Accident ☐ District ☐ Other ☐ Automobile ☐ Pedestrian	

APPENDIX C

Supervisor's Incident Investigation Report

<https://www.chaffey.edu/risk-management/docs/occupational/vsp-sup-incident-rep.pdf>

		
SUPERVISOR'S INCIDENT INVESTIGATION REPORT		
This form must be completed by the Supervisor as soon after the incident occurred as possible. This document is used for gathering information for investigating incidents and their causes so corrective action can be implemented to avoid recurrence of future incidents. Return completed reports to the Office of Risk Management.		
EMPLOYEE INFORMATION		
Name of Employee: _____		
Department: _____	Campus: _____	
Position/Title: _____	Colleague ID: _____	
Did the employee go to the doctor, urgent care, or hospital?		☐ YES ☐ NO
Did the employee lose time from work?		☐ YES ☐ NO
If yes, hours lost on day of incident: _____		
Has employee returned to work?		☐ YES ☐ NO
INCIDENT INFORMATION		
Date of Incident: _____	Time of Incident: _____	Date Reported: _____
Incident Location: _____		
How did the incident occur? (Describe what the employee was doing at the time of the incident, what happened, who was involved)		
List injured body parts: _____		
List property damage, if any: _____		
Witness names and contact information: _____		
Was the employee properly instructed <u>on</u> performing safe and efficient job tasks?		☐ YES ☐ NO
Did the employee violate any job instructions?		☐ YES ☐ NO
Was necessary protective equipment worn (if applicable)?		☐ YES ☐ NO
Was poor housekeeping a factor that caused this incident to occur?		☐ YES ☐ NO
Was horseplay a factor in causing this incident?		☐ YES ☐ NO
Was the incident caused by something that needed repairs?		☐ YES ☐ NO
Was there a guard (if appropriate) on the equipment?		☐ YES ☐ NO
Were there any specific personal items that contributed to the incident?		☐ YES ☐ NO
Was the incident caused by an unsafe act?		☐ YES ☐ NO
Did the employee report the incident to the supervisor immediately?		☐ YES ☐ NO
Unsafe conditions? (Was unguarded or unsafe condition of machinery, equipment, building or premises involved? If yes, please preserve the evidence)		
Actions taken: (After the incident, what did the employer do to correct the conditions that caused the incident?)		
Additional investigation needed? ☐ YES ☐ NO Additional training or equipment needed? ☐ YES ☐ NO		
SUBMITTED BY		
Print Supervisor's Name _____	Supervisor's Signature _____	Date _____