



## Driver Vehicle Form

**First Name:**

**Last Name:**

**Vehicle Make (i.e Honda):**

**Vehicle Model (i.e. Civic)**

**Vehicle Year:**

**Vehicle Trim Package (i.e. EX, LX, LE):**

**Odometer Reading:**

**Vehicle Condition** (<https://help.edmunds.com/hc/en-us/articles/206103047-Vehicle-Conditions-in-True-Market-Value-TMV-Pricing>)

Select One:      Outstanding      Clean      Average      Rough      Damaged

**Date:**

**Employee Print:**

**Employee Sign:**

Employee agrees that: (1) Employee will use the vehicle identified above for deliveries and other work-related purposes; (2) the information about the vehicle is accurate to the best of Employee's knowledge after reviewing vehicle records (if needed) and the applicable definitions for identifying the vehicle's condition; (3) this information, and the number of annual miles driven, both personal and work related, by Employee, will be used by the Employer to calculate Employee's actual work-related vehicle expenses for which Employee will be reimbursed; (4) Employee has been informed and understands how the work-related vehicle expenses will be calculated; and (5) the result of that calculation will equal or exceed Employee's actual work-related vehicle expenses.