UNIVERSITY OF OREGON Risk Management

Request to use Personal Vehicle for University of Oregon Business

(Please retain in department. In the event of an accident, the Office of Risk Management will ask for the original)

Employee/Student Name _____ **UO ID** _____

Vehicle Insurance Company _____ **Policy Number** _____

I request approval to use my own vehicle for official UO business as defined in university policy and rules on occasion during this year.

I understand and agree that,

1. I will comply with all applicable rules and regulations.

2. It is my responsibility to carry liability, uninsured motorist, and personal injury protection insurance on my vehicle, as per state law. I understand that the University only provides coverage for physical damage, uninsured motorist, and personal injury protection for vehicles owned by the University. This means that the University will not pay the costs of any repairs to my vehicle; nor will it necessarily provide bodily injury coverage for me if I am in my own vehicle. When I am using my own vehicle on official University business, I understand that my auto insurance will apply first. In an accident, if the liability loss exceeds my own policy limits, the University's coverage will apply to the excess over my policy limits. The University will not cover any liability I incur when I am not acting within the scope of my University employment or duties. Nor will it cover if my act or omission amounts to malfeasance in office or willful or wanton neglect of duty.

3. If I am involved in an auto accident while on University business, I will advise the University of Oregon, Office of Risk Management within 24 hours by contacting (541) 346-8316, riskmanagement@uoregon.edu.

_____	_____	_____
Employee/Student Signature	Date	Phone

Approved By:

_____	_____	_____
Supervisor, Dean, Director or Dept. Head Signature	Date	Phone

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Department