

# ADMINISTRATIVE PROCEDURES



Procedure Number: 30-11

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*C. Duchelberry*  
County Administrator

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SUBJECT: **VEHICLE OPERATION AND ACCIDENT REPORTING**

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DEPARTMENT RESPONSIBLE: All County Departments

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## 1. **STATEMENT**

It is the intent of Pima County that any individual who drives a County Vehicle or a personal vehicle on County business operates the vehicle in a safe and responsible manner and submits timely reports for all accidents.

## 2. **DEFINITIONS**

- A. **Accident** – An event causing bodily injury or property damage triggered by an impact occurring between a vehicle and another vehicle, a person, animal, road debris, or fixed object.
- B. **Authorized Driver** – A permanent, intermittent, or temporary employee, to include any intern, seasonal employee, volunteer, or other personnel who have been authorized by Pima County to drive a County Vehicle or a personal vehicle on County business.
- C. **County Vehicle** – Any County owned, leased, or rented vehicle including, but not limited to, sedans, trucks, vans, and heavy equipment.
- D. **Driver Authorization** – The Pima County application process set forth in Administrative Procedure 30-31, Driver Qualification and Authorization, that authorizes an individual to operate a County Vehicle or a personal vehicle on County business.
- E. **Driving on County Business** – Driving from one location where County business has been conducted to another location to conduct County business, with the exception of Incidental Personal Use.
- F. **Incidental Personal Use** – Minimal personal use of a County Vehicle, such as stopping for an errand, a rest, or a lunch break on the way between work-related stops; any detour of more than one mile may be considered to be non-incidental, absent special circumstances.

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**3. VEHICLE USE****A. Authorized Use of Pima County Vehicles**

1. Any individual that operates a County Vehicle must be an Authorized Driver as outlined in Administrative Procedure 30-31, Driver Qualification and Authorization.
2. County Vehicles are provided to support the performance of job duties; therefore, County Vehicles are to be used almost exclusively for work-related purposes.
3. Incidental Personal Use is permitted provided that the personal use conforms to this procedure and any other Pima County Administrative Procedure or Board of Supervisors' Policy regarding vehicle use. Such personal use must not interfere with the Authorized Driver's job duties or performance.
4. Incidental Personal Use shall consist only of minimal personal use of a County Vehicle, such as stopping for an errand, a rest, or a lunch break on the way between work-related stops; any detour of more than one mile may be considered to be non-incidental, absent special circumstances.

**B. Authorized Use of a Personal Vehicle on County Business**

It may be necessary at times for an Authorized Driver to use his or her personal vehicle for County business. Such use is permitted only under the following conditions:

1. Use of a personal vehicle must be authorized by the Department Director or his or her designee.
2. Any individual who drives a personal vehicle on County business must be an Authorized Driver as outlined in Pima County Administrative Procedure 30-31, Driver Qualification and Authorization.
3. Only vehicles registered and licensed by the State of Arizona may be used for County business.
4. Personal vehicles used on County business must have vehicle insurance coverage as established by applicable Arizona state law.
5. An individual who uses a personal vehicle on County business is primarily covered by the owner's automobile liability insurance limits in the event of an accident. Driver Authorization activates Pima County automobile liability insurance when the amount of the claim exceeds the owner's insurance limits.

**C. Pre-Trip Inspection**

1. A pre-trip inspection is required before operating any County Vehicle. Inspect the vehicle for obvious safety concerns prior to use, report any such concerns to the appropriate authority prior to driving the vehicle, and do not operate any County Vehicle that has deficiencies that make it unsafe to drive.
2. Pre-trip inspections are a valuable tool for identifying damage that may have been caused by a previous driver. If a pre-trip inspection is not performed and damage is discovered after use, the Driver Safety Committee may find the last driver responsible.
3. A Driver Pre-Trip Checklist is located on the Fleet Services Intranet. The form can be found at <http://intranet.pima.gov/Fleet/documents/DriverPre-TripChecklist.pdf>. This form does not replace the Department of Transportation heavy equipment Commercial Driver License pre-trip inspection as required by federal law.

**D. Privacy**

No driver or passenger in any County Vehicle should have an expectation of privacy regarding use of the vehicle. There should be an expectation that global positioning systems (GPS) and vehicle performance and safety devices have been installed in County Vehicles and are being used to monitor the use of the vehicle. Refer to Administrative Procedure 30-32, Global Positioning Systems (GPS) in County Vehicles, for further information.

**E. Department Motor Pool Vehicle Use Sign-Out Sheet**

To use a Department or Division motor pool vehicle all Authorized Drivers must sign the vehicle in and out using a Department sign-out sheet approved by Risk Management. A sample sign-out sheet, Department Motor Pool Vehicle Use Sign-Out Sheet, is attached (Exhibit 1). Risk Management will review sign-out sheets periodically.

**4. DRIVER SAFETY PROCEDURES****A. Alcohol, Illegal Drugs, Tobacco, and Firearms Prohibited**

1. No individual shall possess, transport, or consume alcohol or illegal drugs in a County Vehicle, unless such activity is performed in the course of his or her assigned duties. Any such possession, transport, or consumption of alcohol or illegal drugs in a personal vehicle while on County business is otherwise prohibited under other Pima County procedures, Board of Supervisors' policies, or federal and/or state laws.
2. No individual shall smoke or use any tobacco products in County Vehicles, County pickup truck beds, or any other Pima County fleet vehicle at any time.

3. Only AZPOST certified peace officers (who are paid by Pima County as such) are allowed to carry firearms or weapons, concealed or otherwise, in County Vehicles. Employees may receive approval from management to carry firearms in the performance of assigned County business. Example: Pima County shooting range personnel may transport firearms and ammunition to and from and within sites as approved by the Department Director.

**B. Electronic Equipment Use**

1. No Authorized Driver shall read from or enter data into any handheld or other electronic device while driving a County Vehicle or a personal vehicle on County business. This includes texting, e-mailing, instant messaging, obtaining navigational information, or engaging in any other form of electronic data retrieval or electronic data communication, including the use of a cell phone, smart phone, laptop, computer, or similar device.
2. Conversations using cell phones while driving shall be limited to essential business only and should occur only when the vehicle is not in motion.
3. In special circumstances, Department Directors may exempt certain employees or vehicles from the requirements of this Section provided such exemption is reasonably necessary to perform the job duties in a safe manner.

**C. General Safety Precautions**

Except for an AZPOST certified peace officer (who is paid by Pima County as such) acting in the performance of his or her duties, an Authorized Driver operating a County Vehicle shall not:

1. Jump-start another vehicle. Exception: A County Vehicle may be used to jump-start another County Vehicle only if the vehicles are in a remote location and other options are not available.
2. Push or pull another vehicle or a non-County trailer.
3. Use any radar detector, laser detector, or similar device.

**D. Ignition Interlock Device**

1. Pima County prohibits the installation of Ignition Interlock Devices in County Vehicles.
2. Pima County prohibits the use of a personal vehicle equipped with an Ignition Interlock Device to perform County business.
3. Employees with an Ignition Interlock Restricted License (IIRL) should refer to Administrative Procedure 30-31, Driver Qualification and

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Authorization, for the process required for driving a County vehicle or a personal vehicle on County business with an IIRL.

4. Departments do not have the authority to supersede this Section or to sign an Ignition Interlock Employer Notification form allowing an individual to drive with an Ignition Interlock Restricted License.

**E. Impaired Driving**

An individual must not operate a County Vehicle or a personal vehicle on County business when his or her ability to do so is or could be impaired, affected, or influenced by alcohol, an alcohol hangover, fatigue, illegal drugs, illness, injury, over-the-counter medication, or prescription medication.

**F. Motorcycles and Bicycles**

When a motorcycle or a bicycle is used to perform County business, a proper helmet must be worn. Individuals shall be familiar with and abide by applicable safety issues and traffic laws.

**G. Passengers**

Authorized Drivers may transport passengers in County Vehicles only when necessary in the course of conducting County business.

**H. Safety Belt Use**

1. Use of safety belts is mandatory by all occupants of County Vehicles any time the vehicle is in motion. Authorized Drivers may not place a vehicle in motion unless all passengers are properly buckled up.
2. The number of passengers in any vehicle may not exceed the number of available safety belts. Passenger travel in pickup truck beds is prohibited unless travel in the truck bed is required to accomplish a task in the performance of County business.

**I. Securing Property in County Vehicles**

Security precautions should be taken when parking County Vehicles. Do not leave any valuables visible inside the vehicle while it is parked. Valuables should be locked in the trunk. Doors should be locked at all times when the vehicle is unattended. An individual is responsible for County property such as computers and work equipment under his or her control. The County will not reimburse the claimant for personal property that has been stolen or vandalized while stored in a County Vehicle.

**J. Traffic Laws**

Authorized Drivers must abide by all federal, state, and local motor vehicle regulations, laws, and ordinances. Authorized Drivers will be personally responsible for any citations received while driving a County Vehicle and must promptly pay any associated fines.

**K. Transportation of Chemicals**

Authorized Drivers in a County Vehicle are not permitted to transport flammable or combustible liquids unless a U.S. Department of Transportation approved container is used with a capacity of five gallons or less and only contains products as authorized by applicable federal regulations.

**5. ACCIDENT REPORTING**

The purpose of this Section is to establish procedures for the investigation and reporting of accidents involving County owned, leased, or rented vehicles. These accident reporting procedures also apply to a personal vehicle when such vehicle is being used on County business at the time of the accident. These guidelines are outlined on the manila-colored accident envelope found in the glove compartment of all County Vehicles (In Case of an Accident Reporting Guidelines).

**A. Damage to a County Vehicle – Single Vehicle Accident**

For single-vehicle accidents resulting in damage to a County Vehicle, the Authorized Driver shall complete and submit a Vehicular Loss Form (Exhibit 2) to Risk Management by the next work day.

**B. Damage to a Third Party Vehicle or Property**

1. Any accident resulting in damage to a third party vehicle or property must be immediately reported to the law enforcement agency having jurisdiction in the area.
  - a. If law enforcement responded, a copy of the police report must be submitted to Risk Management.
  - b. If law enforcement does not respond, every attempt must be made to gather as much information as possible. For example, taking photographs with a cell phone.
2. Under no circumstances shall an Authorized Driver make any statements relative to County liability or express an assumption of fault at the accident scene or thereafter. A simple statement to the effect that the accident details are being reported to Risk Management will suffice.
3. The Authorized Driver, if capable, must notify his or her immediate supervisor while at the scene of the accident. Supervisors shall ensure that appropriate information is gathered for any vehicle accident.
4. In the event a person is injured and transported from the scene, a vehicle is towed from the scene, or a fatality occurs, the supervisor or driver shall call Risk Management at 724-4477 Monday – Friday 8:00 a.m. – 5:00 p.m. After hours, weekends, and holidays, call the Risk Management emergency number at 724-3000.

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5. The Authorized Driver shall use the Vehicular Loss Form to document information at the scene to include the other driver, injured persons, and witnesses.
    - a. The Authorized Driver must complete the Vehicular Loss Form with his or her supervisor and fax the form by secure fax to Risk Management by the next work day. Any photographs, videos, police reports, or other supporting documents must be included.
    - b. An analysis of the information will be conducted by Risk Management and, in certain situations, by the Driver Safety Committee to determine the preventability of the accident and appropriate action.
  6. Vehicles involved in an accident must be taken to Fleet Services within three work days of occurrence. Only Fleet Services is authorized to inspect and repair a vehicle or determine whether it is safe to release and drive until the next scheduled maintenance.

6. **FORMS**

All required PDF fillable forms can be found on the Pima County Department of Finance and Risk Management Intranet.



**PIMA COUNTY  
DEPARTMENT OF FINANCE & RISK MANAGEMENT**

RISK MANAGEMENT DIVISION  
130 W. CONGRESS ST., 9<sup>TH</sup> FLOOR  
TUCSON, ARIZONA 85701-1317  
(520) 724-4477 FAX (520) 791-6614

Please email this form to [driversafety@pima.gov](mailto:driversafety@pima.gov) or fax to (520) 791-6614 within 24 hours of incident. This is a secure fax line.

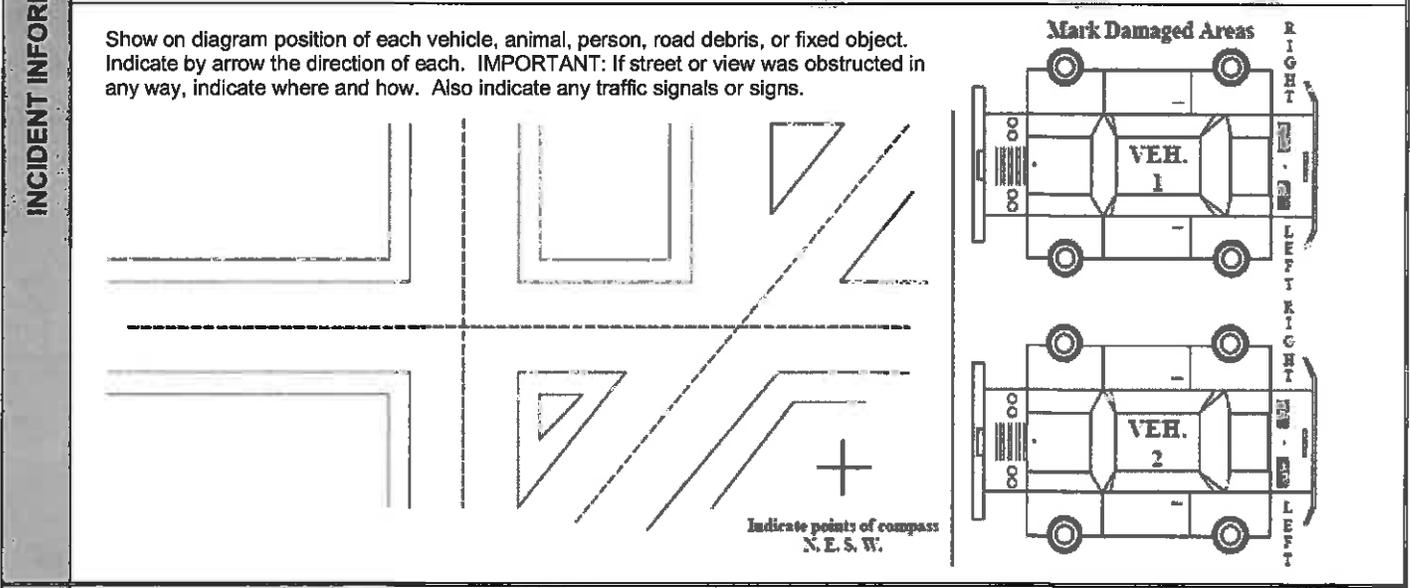
**Vehicle Loss Form**

Type of Incident:  Auto Accident  Other Damage  Vandalism to Vehicle

Date of Incident: \_\_\_\_\_ Time of Incident: \_\_\_\_\_  AM  PM

<b>COUNTY DRIVER</b>	<b>DRIVER</b>	Last Name		First Name		EIN			
		Department		Division		Driver's Phone Number			
		AZ Driver License #		Expiration Date		Have you been authorized to drive by Pima County? <input type="checkbox"/> Yes <input type="checkbox"/> No			
		Date of Defensive Driving Training				Are you a CDL driver for Pima County? <input type="checkbox"/> Yes <input type="checkbox"/> No			
		Supervisor		Phone Number		Was a citation issued to you for this accident? <input type="checkbox"/> Yes <input type="checkbox"/> No			
<b>COUNTY DRIVER</b>	<b>VEHICLE #1</b>	Type of Vehicle <input type="checkbox"/> Car <input type="checkbox"/> Truck <input type="checkbox"/> Van <input type="checkbox"/> Commercial <input type="checkbox"/> Personal Vehicle <input type="checkbox"/> Other		Was this vehicle towed from the scene? <input type="checkbox"/> Yes <input type="checkbox"/> No					
		Vehicle Year Make Model				Was the vehicle being used on County business? <input type="checkbox"/> Yes <input type="checkbox"/> No			
		Vehicle License #		Equipment #		# of Passengers			
		Describe Damages (Parts, type, and extent of damage)							
		If Privately Owned, Name and Address of Owner				If Privately Owned, Insurance Company			
<b>OTHER DRIVER</b>	<b>DRIVER</b>	Owner of Vehicle #2		Owner's Phone Number					
		Address		City		Zip			
		Driver's Name		Driver License #		Was driver cited? <input type="checkbox"/> Yes <input type="checkbox"/> No			
	Address		City		Zip				
	<b>OTHER DRIVER</b>	<b>VEHICLE #2</b>	Type of Vehicle <input type="checkbox"/> Car <input type="checkbox"/> Truck <input type="checkbox"/> Van <input type="checkbox"/> Commercial <input type="checkbox"/> Other		Was this vehicle towed from the scene? <input type="checkbox"/> Yes <input type="checkbox"/> No				
Vehicle Year Make Model			Vehicle License #		# of Passengers				
Describe Damages (Parts, type, and extent of damage)									
Insurance Company			Policy #						
<b>OTHER PROPERTY</b>	What was Damaged?								
	Name and Address of Owner		City		Zip		Phone		
<b>INJURED PARTIES</b>	Name and Address		City		Zip		Phone		
	1.								
<b>WITNESSES</b>	Name and Address		City		Zip		Phone		
	1.								
<b>WITNESSES</b>	Name and Address		City		Zip		Phone		
	2.								

INCIDENT INFORMATION	Location (Address or Major Cross Streets)		
	Was law enforcement notified?	<input type="checkbox"/> Yes <input type="checkbox"/> No	If Yes, which agency?
			Case #
	Describe in detail what happened. Use additional paper if necessary.		



SUPERVISOR'S REPORT	Was any person transported to hospital? <input type="checkbox"/> Yes <input type="checkbox"/> No Who & Where Transported _____
	Was a vehicle towed? <input type="checkbox"/> Yes <input type="checkbox"/> No Where _____
	Was there a fatality? <input type="checkbox"/> Yes <input type="checkbox"/> No Who & Where Transported _____
	<b>If you answered YES to <u>any</u> of these questions, please call the Risk Management emergency line at 724-3000 immediately.</b>
	Was a citation issued to the employee? <input type="checkbox"/> Yes <input type="checkbox"/> No
	Was a third party (non-employee) involved in the accident? <input type="checkbox"/> Yes <input type="checkbox"/> No
	Was a third party's vehicle or property damaged in the accident? <input type="checkbox"/> Yes <input type="checkbox"/> No
	Was a County Vehicle or property damaged (estimated to be greater than \$1,000)? <input type="checkbox"/> Yes <input type="checkbox"/> No
Did the employee seek or will seek medical attention? <input type="checkbox"/> Yes <input type="checkbox"/> No	
<b>If you answered YES to <u>any</u> of these questions, please complete the Supervisor Incident Analysis and Prevention form.</b>	

**STOP** Before signature, please ensure all information is included and any police reports, pictures, citations, and any other documentation are attached.

Authorized Driver's Signature	Date
Supervisor's Signature	Date

<i>For Risk Management Use Only</i>		
Risk Management Case Number	To be reviewed by the Driver Safety Committee? <input type="checkbox"/> Yes <input type="checkbox"/> No	If yes, Date