

**Sarpy County: Personal Vehicle Use Waiver**

Name: \_\_\_\_\_

Department: \_\_\_\_\_

Dates of Travel: \_\_\_/\_\_\_/\_\_\_ through \_\_\_/\_\_\_/\_\_\_

Location: \_\_\_\_\_

Reason for Travel: \_\_\_\_\_

\_\_\_\_\_

Driver's License State: \_\_\_\_\_ #: \_\_\_\_\_

Vehicle Make: \_\_\_\_\_ Model: \_\_\_\_\_

License Plate Number: \_\_\_\_\_

Insurance Carrier: \_\_\_\_\_ Policy #: \_\_\_\_\_

I hereby certify that in lieu of driving a County owned vehicle, I have chosen to drive my own vehicle to conduct County business. By signing this waiver, I attest and affirm that I possess a valid Drivers' License which I will have in my possession at all times during travel, and that I will obey all traffic laws while traveling for County business.

I further attest and affirm that I currently carry insurance coverage as required by law and sufficient to cover potential damage. I understand that I am responsible for insuring my own vehicle and that it is my responsibility to pay any and all premiums and deductibles required.

Finally, I attest and affirm that I shall hold harmless Sarpy County for any and all property damage liability which may result from my use of my own personal vehicle for County business. I further waive any potential claim against the County for property damage which may be sustained to my personal vehicle while driving for County business.

Signed: \_\_\_\_\_  
(Official or Employee Traveling)

I have reviewed the above request and approve the personal vehicle use.

Signed: \_\_\_\_\_  
(Official/Department Head)