

## Monthly Emergency Response Log

Instructions: All employees with authorization to commute as an emergency responder will complete this log monthly and submit it to the administrator of Fleet Management through the chain of command by the 5<sup>th</sup> working day of each month. Failure to submit this log or continue submission of logs, which indicate no emergency responses, may result in revocation of the agency director's authorization to use a state vehicle for commuting purposes.

Name: \_\_\_\_\_ For the Month/Year: \_\_\_\_\_ / \_\_\_\_\_  
Printed Name of Authorized Employee

List emergency responses occurring during the period above for which the state vehicle was used outside of normal work hours:

	<u>Date/Time</u>	<u>Description of Emergency</u>
1.		
2.		
3.		
4.		
5.		
6.		
7.		
8.		
9.		
10.		

Use additional lines if necessary

\_\_\_\_\_/\_\_\_\_\_  
Signature of Employee Date

\_\_\_\_\_/\_\_\_\_\_  
Signature of Supervisor Date

Recommendation for commuting in state vehicle: \_\_\_\_\_

Any negative recommendation will be provided in writing to the chief of Operations.

\_\_\_\_\_/\_\_\_\_\_  
Signature of Administrator of Fleet Management Date

\_\_\_\_\_/\_\_\_\_\_  
Signature of Chief of Operations Date

Upon review/concurrence for recommendations for removal, the information will be submitted to the agency director.

Distribution: Agency director or designee  
Employee  
Employee File  
Central Human Resources Unit  
Administrator of Fleet Management