

Company Vehicle Assignment Agreement

Employee Name:

Job Title:

Department:

Employee ID:

Vehicle Details

Make / Model:

Year:

Color:

License Plate:

VIN:

Agreement Terms

Assignment Start Date:

Assignment End Date:

I acknowledge receipt of the vehicle described above and agree to abide by all company vehicle policies and procedures. I understand that the vehicle remains the property of the company and is to be used for business purposes only, unless otherwise authorized.

I will be responsible for maintaining the vehicle in good condition and returning it upon request or termination of my employment. I have been provided with a copy of the company vehicle policy.

Employee Signature Date

Manager/Supervisor Signature Date