

Fleet Vehicle Test Drive Consent Form

Driver Information

Name

Phone Number

Email

Driver's License Number

License Expiry Date

State/Province of Issue

Vehicle Information

Make & Model

Year

License Plate

Test Drive Details

Date

Start Time

End Time

Route / Special Instructions

Consent & Declaration

☐ I confirm that my driver's license is valid and that I have read and understood the test drive terms and safety guidelines.

☐ I consent to participate in the test drive and assume responsibility for my actions during the test drive.

Driver Signature

Date