



## FLEET MANAGEMENT POLICY ACKNOWLEDGMENT

Capital Assets Management

The agency must complete and sign this form electronically, then email it to <a href="mailto:fleet.system@omes.ok.gov">fleet.system@omes.ok.gov</a>.

AGENCY INFORMATION					
Agency name	Agenc	Agency#			
Address					
Address					
Fleet administrator name and title	Email		Phone		
Alternative contact name and title	Email			Phone	
UNIVERSAL FLEET PROCESSES (vehicle-owning and -leasing agencies)					
Duties/job description of the fleet administrator		□No	☐ Yes – a	ttach	Yes – OMES
Motor pool/shared vehicles		□No	Yes – a	ttach	Yes – OMES
Vehicles driven from home to work (refer to OMES CAM Form FM022)	)	☐ No	Yes – a	ttach	Yes – OMES
Driver orientation and training		□No	Yes – a	ttach	Yes - OMES
ccident management		□No	☐ Yes – a	ttach	Yes - OMES
Environmental impact: use of alternative fuels, utilization, idling, etc.		□No	☐ Yes – a	ttach	Yes – OMES
Other:		□No	Yes – a	ttach	Yes – OMES
FLEET PROCESSES (vehicle-owning agencies)					
Statute authorizing vehicle acquisition:					
intenance schedule and service location		□No	Yes – a	ttach	Yes - OMES
Fleet card: fuel purchasing, PIN management, authorization levels, et	tc.	□No	☐ Yes – a	ttach	Yes - OMES
Decals/markings and numbering		□No	☐ Yes – a	ttach	Yes - OMES
Vehicle replacement thresholds (mileage, age, condition, etc.)		□No	Yes – a	ttach	Yes - OMES
Vehicle surplus process (using OMES State Surplus, other)		□No	☐ Yes – a	ttach	Yes - OMES
Other:		□No	☐ Yes – a	ttach	Yes - OMES
NOTES					
SIGNATURE					
The information in this report is true and correct the best of my knowledge.					
Signature of agency fleet administrator			Date		