#### **Buckfield Fire-Rescue Department**

#### Personally Owned Vehicle (POV) Use Policy

#### **Policy Title:**

Use of Personally Owned Vehicles (POVs) for Fire-Rescue Department Operations

#### **Effective Date:**

December 3, 2024

# Reviewed/Updated:

December 3, 2024

#### **Purpose**

The purpose of this policy is to establish clear guidelines for Buckfield Fire-Rescue Department personnel using personally owned vehicles (POVs) for official duties. The policy seeks to protect employees and the Town of Buckfield by outlining expectations, risks, and insurance responsibilities.

# **Policy Statement**

#### 1. Authorization and Risk

Personnel may use their POVs for Fire-Rescue Department duties only when necessary and appropriate. The use of POVs is entirely at the employees' risk, as the Town of Buckfield's insurance does not cover damage or loss to personally owned vehicles, even during official use.

# 2. Preference for Town-Owned Vehicles

Personnel should prioritize the use of Town-owned fire-rescue apparatus and vehicles. POVs should only be used when Town-owned vehicles are unavailable, impractical, or insufficient to meet operational needs.

# 3. Voluntary Use of POVs

Fire-Rescue Department personnel are not required to use their POVs, except to travel to the station for a call. Any other use is voluntary and at the employee's discretion.

Personnel authorized by the Fire and Rescue Chiefs to run red auxiliary lights must adhere to all traffic laws at all times. Auxiliary lights are considered **courtesy lights only** and do not grant any special driving privileges. Under no circumstance is a POV considered an "Authorized Emergency Vehicle," except for the Fire Chief, Rescue Chief, Deputy Fire Chief, or Deputy Rescue Chief as specified in **Title 29-A §2054**.

# 4. Vehicle Damage and Insurance Responsibility

In the event of damage to a POV during Fire-Rescue Department duties, the employee must

seek reimbursement through their personal vehicle insurance. The Town of Buckfield will not assume liability for any damage or loss (Exception: See 6).

# 5. Insurance Requirements

Employees must maintain adequate insurance coverage for their POVs. It is the employee's responsibility to verify coverage with their insurance provider to ensure they are protected while using the vehicle for Fire-Rescue Department-related activities.

# 6. Limited Coverage for Fire and Rescue Chiefs and Deputy Chiefs

The vehicles of the Fire Chief, Rescue Chief, Deputy Fire Chief, and Deputy Rescue Chief are considered exceptions to the general policy regarding Personally Owned Vehicles (POVs). While the Town of Buckfield does not assume liability for damage or loss to most POVs, the Town's insurance provides limited supplemental coverage for the vehicles of these appointed officers when operating as an "authorized emergency vehicle" as outlined in **Title 29-A §2054**. This supplemental coverage is designed to address what is not covered by personal auto insurance, such as deductibles and shall not exceed the maximum set forth by the Town of Buckfield's insurance policy. It does not provide coverage if someone other than the appointed officer is operating the vehicle.

# **Acknowledgment and Compliance**

Employees wishing to use a POV in an official capacity must sign an acknowledgment form, agreeing to the terms of this policy and confirming adequate insurance coverage. Personnel must also ensure their POV is in a safe and operational condition before use in Fire-Rescue Department activities.

#### **Questions or Clarifications**

For any questions or concerns about this policy, personnel should contact the Fire Chief, Rescue Chief or the Town Manager.

# Approved by:

Robert Hand, Chairman

Sandra Fickett, Vice Chairman Azalea Cormier, Selectman Heather Henley, Selectman Peter Fickett, Selectman

December 3, 2024

Date

Amended by the Buckfield Select Board by a majority vote at a duly called meeting on January 7, 2025.

# Buckfield Fire-Rescue Department Acknowledgment Form for Use of Personally Owned Vehicles (POV)

Employee Name:			
Position:			
Vehicle Make/Model:  License Plate Number:  Insurance Provider:			
		Policy Number:	
I,, acknow and understand the <b>Buckfield Fire-Rescue Department Perso Policy</b> . I agree to abide by all terms and conditions outlined in the to:	nally Owned Vehicle (POV) Use		
<ol> <li>The voluntary nature of POV use for Fire-Rescue Departr</li> <li>My responsibility for any damage or loss to my POV during activities.</li> <li>The requirement to maintain adequate personal vehicle</li> <li>Adherence to all traffic laws when using red auxiliary lightness lights are for courtesy only and do not grant emerging outlined in Title 29-A \$2054 for the Fire Chief, Rescue Cl</li> </ol>	insurance coverage. its, with the understanding that ency vehicle status, except as		
Rescue Chief. I certify that:			
<ul> <li>My vehicle is in safe and operational condition.</li> <li>I have verified that my insurance policy covers the use of Department-related activities.</li> </ul>	my POV for Fire-Rescue		
By signing this form, I acknowledge that the Town of Buckfield as loss, or incident involving my POV, and I accept full responsibility			
Employee Signature:  Date:  Fire Chief/Rescue Chief/Town Manager Signature:			

# Buckfield Fire-Rescue Department Acknowledgment Form for Use of Personally Owned Vehicles (POV) Fire Chief, Rescue Chief, Deputy Fire Chief, Deputy Rescue Chief

Emplo	yee Name:
Positi	on:
Vehicl	e Make/Model:
Licens	se Plate Number:
Insura	nce Provider:
Policy	Number:
l,	, acknowledge that I have received, read,
and ur	nderstand the <b>Buckfield Fire-Rescue Department Personally Owned Vehicle (POV) Use</b> . I agree to abide by all terms and conditions outlined in the policy, including but not limited
1. 2.	The voluntary nature of POV use for Fire-Rescue Department duties.  My responsibility for any damage or loss to my POV during Fire-Rescue Department activities.
3. 4.	The requirement to maintain adequate personal vehicle insurance coverage.  Adherence to all traffic laws when using red auxiliary lights, with the understanding that these lights are for courtesy only and do not grant emergency vehicle status, except as outlined in <b>Title 29-A \$2054</b> for the Fire Chief, Rescue Chief, Deputy Fire Chief or Deputy Rescue Chief.
5.	While serving as the Fire Chief, Rescue Chief, Deputy Fire Chief, or Deputy Rescue Chief, I understand that my vehicle is an exception to the general policy. The Town of Buckfield provides limited supplemental insurance coverage for my vehicle while operating as an "authorized emergency vehicle" outlined in <b>Title 29-A §2054</b> . I further understand that it only provides coverage while I am operating my POV. This coverage addresses costs such as deductibles not covered by my personal auto insurance.
I certif	
•	My vehicle is in safe and operational condition.  I have verified that my insurance policy covers the use of my POV for Fire-Rescue  Department-related activities.
	ning this form, I acknowledge that the Town of Buckfield assumes no liability for any damage, r incident involving my POV, and I accept full responsibility for its use.
Date:	byee Signature:
iown	Manager Signature:

Date: \_\_\_\_\_