

Sample grey fleet policy

The purpose of this policy is to establish guidelines for employees and volunteers who use their personal vehicles (referred to as "grey fleet") for work-related purposes, including but not limited to attending meetings, events or travelling to job sites, whether being reimbursed for expenses or not, claiming usage in a tax return or those owned through novated leasing.

The use of grey fleet is discouraged in favour of using pool cars, however, there are instances when pool cars are unavailable or inappropriate for the type or frequency of work being performed.

This policy aims to ensure that employees and volunteers using their personal vehicles for work purposes, do so safely and in compliance with legal and organisational standards and minimum safety standards are established prior to the use of grey fleet in order to ensure the vehicle is well maintained and insured, just like any fleet vehicle.

This policy applies to the vehicle registration below and is valid for a period of two years.

Employee/Volunteer responsibilities:

Grey fleet	Criteria	✓
The driver	Must have a valid driver's license appropriate for the vehicle being used.	
	Must carry a first-aid kit and emergency contact information in their vehicle.	
	Must report any accidents or vehicle issues to the local government immediately.	
	Will notify the local government when a different vehicle is used for work purposes.	
The vehicle	Vehicle model and registration number:	
	Is properly maintained, in good working condition and is free from defects.	
	Is fit-for-purpose for the type of road and travel conditions.	
	Is not permitted to travel outside the local government area for work purposes without prior approval.	
	Is fit-for-purpose where passengers, fuel, materials or equipment is being transported.	
	Has a minimum ANCAP rating of _____ and is less than ____ years old.	
	Excludes motorcycles, e-scooters, e-bikes and customised or modified vehicles.	
	Has valid registration and is insured for business use (for frequent grey fleet use), and preferably comprehensive cover).	

I have read, understood, and agree to comply with this Grey Fleet Policy.

Employee/Volunteer Name: _____ Signature: _____

Employer Representative Name: _____ Signature: _____

Date: _____