

## **DELIVERY DRIVER AGREEMENT**

(Retain in Employee File)

Delivery Driver Information

First and Last Name: \_\_\_\_\_

Driver's License Number: \_\_\_\_\_

State: \_\_\_\_\_

As a Delivery Driver for (Store Name) \_\_\_\_\_,

I hereby agree to the following:

- 1) I have read and understand the Delivery Driver Agreement. I agree to comply with the standards and procedures set forth in the said document and with all other guidelines established from time to time for my Delivery Driver position.
- 2) I will attend all scheduled driver meetings.
- 3) I will use due care and caution in the operation of my delivery vehicle and will strictly comply with all safe driving rules of the road, including all speed limits, posted directional signs and parking regulations. Under no circumstances will I operate my delivery vehicle while under the influence of drugs or alcohol or when my physical or mental condition may be otherwise impaired.
- 4) The vehicle I use for delivery services will:
  - Be maintained in good condition and repair
  - Comply with all rules and regulations governing safe and lawful operation
  - Comply with all the guidelines established by my employer
- 5) I agree to immediately notify you if I am involved in any accidents or receive any subsequent citations during the course of my employment.
- 6) I understand that any violation of this Agreement or of any of the standards, procedures or guidelines applicable to my Delivery Driver position may result in suspension or termination. In particular, I acknowledge the need for utmost safety and due care in the operation of my delivery vehicle and in the conduct of delivery services.
- 7) I understand that I am prohibited from carrying any passengers without prior management authorization.
- 8) I agree to only operate the vehicle identified on the vehicle inspection form submitted to management and will not drive a substitute vehicle without management prior approval.

**DELIVERY DRIVER AGREEMENT Cont'd**

Driver: \_\_\_\_\_  
(Please Print)

9) I agree to maintain my automobile insurance (including coverage for Bodily Injury, Property Damage and Personal Liability) AT ALL TIMES while using my vehicle for delivery and will inform my employer if my insurance coverage is changed, canceled or not renewed. I have provided proof of insurance currently in force.

10) I understand that MY insurance is responsible if I am involved in an accident that causes injury or damage to another person and/or their property. I am also aware that neither my employer nor his insurance will cover my vehicle for any damage, whatsoever.

11) I will not use a cell phone or any other mobile device, while operating a vehicle. If my employer requests I use one, I agree to only use it when it is safe to do so and when my vehicle is in Park.

\_\_\_\_\_  
Driver's Signature Date

**For Store Owner or Manager:**

I have reviewed this Driver Agreement with above named driver and have received the required documents per the Delivery Driver Guidelines.

\_\_\_\_\_  
Owner/Manager's Signature/ Store Address. Date