

DRIVER INFORMATION DECLARATION

CHECKLIST

Drivers Licence Details			
Driver Full Name:			
Residential Address:			
Postal Address:			
Mobile Number:		Date Of Birth:	
Licence Number:		Licence Class:	
Licence Expiry:		Licence State of Issue:	
Business Unit:			
Project Name:			
Driver Risk Assessment			
Criteria	Driver Info	Measurement	Recommended Action
Demerit Licence Points		More than 8+ Demerit Licence Points	Driver Training
Age		Under 25 years of age	Online Driver Course/ Toolbox meeting
Distance Travelled/ week		Greater than 500 km	Online Driver Course/ Toolbox meeting
At Fault Motor Vehicle Accidents in the last 24 months		More than 1 motor vehicle accident in 24 month period	Driver Training
Not At Fault Motor Vehicle Accidents in the last 24 months		More than 1 motor vehicle accident in 24 month period	Driver Training
Driver Licence Declaration			
<p>I declare that I am the named person and that I have provided Laing O'Rourke with a copy of my current valid driving licence as numbered above.</p> <p>I confirm that I have duly read E-P-8-0579 Fleet Responsibilities & Requirements Procedure and will comply with Australian driving laws and regulations as contained therein whilst driving on behalf of Laing O'Rourke within Australia.</p> <p>I commit to notifying Laing O'Rourke of any changes to my Driver Licence or my Driver Information above and understand that failure to declare any changes to my Line Manager may result in disciplinary action.</p> <p>Company vehicles will not be issued, or any benefit may be withheld or withdrawn if the declaration is not signed and dated.</p>			
Driver's Signature:		Date:	
Select Use Only			
Copy of Licence: Yes/ No	I.D. Key Tag No.		
Risk Assessment Score:	Review Date:		