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| --- | --- | --- | --- | --- | --- | --- | --- |
| Name |  | Vehicle registration |  | Month |  | Year |  |

* Car allowance drivers should submit this form to their line manager no later than the 7th of each month.
* Vehicle drivers who do not receive car allowance should submit this form to their line manager weekly.
* Your licence will be checked every six months. You must declare any material changes as soon as they occur

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| --- | --- | --- |
| Date | Journey details | Business miles |
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|  |  |  |
| Total business miles | |  |
| Total business miles x \_\_\_\_\_\_\_\_\_\_\_ pence per mile | |  |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| I declare that this is a true record of my business mileage in the period. | | | | | |
| I declare that daily safety checks have been undertaken prior to use, to confirm vehicle safety and road worthiness. (Please report any damage to your line manager immediately and record damage on the necessary form) | | | | | |
| Driver’s eyesight confirmed at min distance of 20.5 metres. | | | Registration no viewed |  | |
| Driver signature |  | | | Date |  |
| Approved by manager | Signature |  | | Date |  |
| Payment processed | Signature |  | | Date |  |

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