

## Vehicle Registration, Insurance and Drivers Licence Declaration

DELIVERY OF MEALS	Full Name:			
	Branch:			
	Vehicle Registration Number:		Expiry date:	
	Vehicle Make & Model:			
	Driver's Licence Number:		Expiry date:	
	Vehicle Insurance Company:			
	Insurance Policy Number:			
	Policy Expiry Date:			
	Type of insurance (please circle)	Comprehensive	Fire / Theft	Third-Party

### Volunteer Declaration

1. I understand that Meals on Wheels Tasmania does not accept any liability arising from the use of a private vehicle on Meals on Wheels business, and
2. I understand that I must comply with the Meals on Wheels Tasmania Motor Vehicle Policy when using my private motor vehicle on Meals on Wheels business, and
3. I understand that if I hold comprehensive vehicle insurance Meals on Wheels Tasmania will agree to pay my insurance excess in the case of an accident where I am at fault, **or**
4. I understand that if I hold compulsory third-party insurance (CTP) Meals on Wheels Tasmania is not liable to pay any funds towards repairs, and
5. I acknowledge and agree that I bear the sole responsibility for any claims, loss or damage that may occur as a result of using my private vehicle on Meals on Wheels business, and I indemnify and keep indemnified Meals on Wheels Tasmania from and against any claims, damages or loss that may be made against Meals on Wheels Tasmania arising from my use of my private vehicle on Meals on Wheels business.

Signature: \_\_\_\_\_

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

### Manager Confirmation

I approve the use of this private motor vehicle for official Meals on Wheels business

Name: \_\_\_\_\_

Position: \_\_\_\_\_

Signature: \_\_\_\_\_

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