APPLICABILITY/ACCOUNTABILITY:

This policy is applicable to all members of the university community, including all trustees, faculty, staff, students, volunteers, contractors, and other users of university automobiles.

DEFINITIONS:

Authorized drivers: A trustee, officer, employee, agent, contractor, volunteer or other person authorized by a university officer to drive a university automobile.

University officer: A person serving in the position of Vice President or higher at the university.

University automobile: A land motor vehicle designed and licensed for use on public roads that is owned, leased, or rented by the university.

POLICY:

1. University automobiles shall be used only by authorized drivers for official university business unless otherwise authorized by a university officer.

2. University automobiles may be used in emergency situations where the protection of life or property is involved and there is no other means of transportation available.
13. University automobiles may not be used for transportation to any airport or other terminal when the length of a trip requires overnight parking, unless otherwise authorized by a university officer.

14. All occupants of university automobiles and all personal automobiles operated on university business shall properly use the seat belts or occupant restraint system provided. If an accident resulting in injury to an employee occurs and the employee is not using the seat belts or occupant restraint system provided and the failure to use the seat belts or occupant restraint system provided contribute to injuries received, worker's compensation benefits may be reduced under the provisions of Section 440.09(4), Florida Statutes.

15. All university automobiles and all personal automobiles operated on university business shall at all times be operated in a safe and courteous manner.

16. All university automobiles and all personal automobiles operated on university business shall operate in compliance with all applicable federal, state or local laws and ordinances. All fines and penalties resulting from such improper use of a vehicle are the personal responsibility of the vehicle operator.

17. Any person who is required to operate a university automobile as part of his or her job responsibilities shall notify their supervisor immediately if their license has expired or been suspended or revoked.

18. The use of headphones, ear-buds, cell phones, smart phones, hand-held computers, smart pads, pagers, or other similar voice or text-enabled devices by drivers of university automobiles is prohibited unless: (i) the driver has removed the university automobile from traffic and come to a complete stop or (ii) the phone or electronic device is being used for audio purposes only with a hands-free accessory or device.

19. The use of any tobacco product inside a university automobile is prohibited.

20. The University Police Department (UPD), as first responders, operate state owned vehicles under the most current General Order. This General Order is up to date with the latest professional standards as indicated by accrediting bodies. UPD will operate state owned vehicles within their General Orders and will be responsible for the enforcement of those applicable General Orders.

SANCTIONS:

Violations of the policies and laws described herein by an employee or student are grounds for disciplinary action up to and including termination or expulsion in accordance with applicable university and the Florida Board of Governors regulations and/or collective bargaining agreements. Such disciplinary actions may also include reprimand or suspension. Violations of these policies and laws by any other users are grounds for terminating their use of university automobiles and other appropriate sanctions.

INITIATING AUTHORITY: Vice President, Facilities & University Architect
RISK MANAGEMENT GUIDE

Automobile Accident Documentation Package

CONTENTS:

- Know Before You Go Automobile Accident Brochure.
- FAU Fleet Automobile Certificate of Insurance.
- Automobile Accident Report.

Questions?

Contact FAU Risk Management at 561-297-2763
If You Are Involved In An Automobile Accident

- Report any accident immediately to your supervisor in accordance with your agency's procedures.
- Have the accident investigated by law enforcement.
- Get the names, addresses, and telephone numbers of any witnesses to the accident.
- Contact Risk Management immediately at (850) 413-3122.
- Don't promise to pay anything.
- At the scene of the accident, do not discuss details of the accident with anyone except the investigating law enforcement officer.
- Obtain a copy of the accident report, if available, and forward it to the Division of Risk Management. Also, complete the information on the back of this brochure.
- Obtain information about the other driver(s) from the investigating law enforcement officer.
- Provide the officer your Agency/University automobile liability policy number as below:

   Florida Atlantic University

   YOUR AGENCY/UNIVERSITY NAME
   ________________
   AUTOMOBILE LIABILITY POLICY #

   REPORT ACCIDENT TO:
   DIVISION OF RISK MANAGEMENT
   (850) 413-3122

Safety Tips

- Plan your trip before you leave.
- Know where you are going.
- Know the routes you plan to take.
- Know how long it will take to arrive.
- Allow sufficient time — avoid having to rush.
- Check the vehicle's tires, brakes, headlights, horn, windshield wipers, and rear-view mirrors before you leave.

Seat Belts Do Save Lives So Buckle Up — It's The Law!
Management Services Rule 60B-1.012 requires mandatory use of seat belts: "Failure to utilize seat belts or occupant restraint system shall be considered improper use of a vehicle and shall subject employees to disciplinary action."

Place All Work Materials In The Trunk!
...such as books, papers, reports, audiovisual equipment and newspapers. Automobile seats were designed for people.

Know And Obey All Traffic Laws!
Speed limits, traffic signs and signals were designed with your safety in mind.

If You Get Tired Or Sleepy, Stop and Rest!

Texting and Dialing a Cell Phone Kills!
Avoid taking your eyes off the road for any reason.

Look Before You Back Up!
Accidents while backing up are the major cause of accidents involving State of Florida vehicles.

Turn On Your Headlights!
At sundown and during bad weather, such as rain or fog.

Know Your Vehicle
Return Alive!
In The Event Of An Accident
Complete The Information Below

Date of Accident: ____________________________________________
Location of Accident: _________________________________________

Occupants of Vehicles or Pedestrians Involved:

1. Name: ____________________________________________________
   Telephone #: ______________________________________________
   Address: __________________________________________________
   City & State: ___________________ Zip Code:__________________
   In Your Vehicle ( ) Other Vehicle ( ) Pedestrian ( )
   Was this person injured? Yes ( ) No ( )

2. Name: ____________________________________________________
   Telephone #: ______________________________________________
   Address: __________________________________________________
   City & State: ___________________ Zip Code:__________________
   In Your Vehicle ( ) Other Vehicle ( ) Pedestrian ( )
   Was this person injured? Yes ( ) No ( )

Witnesses at Scene of Accident:

1. Name: ____________________________________________________
   Telephone #: ______________________________________________
   Address: __________________________________________________
   City & State: ___________________ Zip Code:__________________

2. Name: ____________________________________________________
   Telephone #: ______________________________________________
   Address: __________________________________________________
   City & State: ___________________ Zip Code:__________________

Name and Department Location of Law Enforcement Officer Investigating this Accident:
__________________________________________________________________________
__________________________________________________________________________

Other Driver's Insurance Information:

Automobile Insurance Carrier Name: __________________________________________
Policy Number: ___________________________________________________________
Telephone Number: _________________________________________________________
Policy Number: AL-0201  Fleet Automobile Liability Certificate of Coverage

Name Insured: Florida Atlantic University

Automobile Liability Coverage provided pursuant to Chapter 284, Part II, Section 768.28, Florida Statutes, the Florida Vehicle No-Fault Law, and any rules promulgated thereunder.

Coverage Limits:

General Liability: $200,000.00 each person
                 $300,000.00 each occurrence

Personal Injury:  $10,000.00 each person
                 $10,000.00 each occurrence

Inception Date:  July 1, 2018
Expiration Date: July 1, 2019

DFS-00-864
(9/8/17)
STATE RISK MANAGEMENT TRUST FUND
FLEET AUTOMOBILE LIABILITY
CERTIFICATE OF COVERAGE

In consideration of the provisions and stipulations contained herein or added hereto and for the premium charged, the State Risk Management Trust Fund, hereinafter referred to as the "Fund", certifies that the State department or agency named in this certificate is hereby provided automobile liability coverage. Coverage shall be effective on the inception date at 12:01 a.m. standard time.

This certificate is comprised of the foregoing provisions and stipulations, together with such other provisions and stipulations as may be added hereto by the Fund in the future:

I. LIABILITY COVERAGE

A. Coverage - Bodily Injury and Property Damage

To pay on behalf of the insured all sums which the insured shall become legally obligated to pay (but not to exceed the statutory limits as set forth by Section 768.28, Florida Statutes) for damages because of bodily injury, sickness or disease, including death at any time resulting therefrom (hereafter called bodily injury), sustained or alleged to have been sustained by any person or persons or injury to or destruction of property including loss of use thereof (hereafter called property damage), arising out of the ownership, maintenance, or use including loading or unloading of any owned, hired or non-owned automobile, caused by the negligent or wrongful act or omission of any officer, employee, agent or volunteer of the named insured, as such terms may be further defined herein or by administrative rule, while acting within the scope of his office or employment, pursuant to the provisions and limitations of Chapter 264, Part II and Section 768.28, Florida Statutes.

B. Defense, Settlemend, Supplementary Payments

With respect to such coverage as is afforded by this certificate, the Fund shall:

(a) defend any proceeding against the insured seeking such benefits and any suit against the insured alleging such injury and seeking damages on account thereof, even if such proceeding or suit is groundless, false, or fraudulent. The Fund will investigate all claims filed against the insured in order to determine the legal liability of the insured and to determine damages sustained by the claimant. The Fund will negotiate, settle, or deny the claim based on these findings and appropriate Florida law;

(b) pay all premiums on bonds to release attachments and on appeal bonds required in any such defended suit or an amount not in excess of the applicable limit of liability of this certificate;

(c) pay all expenses incurred by the Fund, all costs taxed against the insured in any such suit and all interest accruing after entry of judgment until the Fund has paid, tendered, or deposited in court such part of such judgment as does not exceed the limit of the Fund's liability thereon;

(d) pay expenses incurred by the insured for such immediate medical relief to others as shall be imperative at the time of the accident.

C. Definitions

The following definitions shall apply to liability coverages established herein:

(a) Named Insured - The department or agency named herein.

(b) Insured - The unqualified word "insured" shall include the State department or agency named herein, their officers, employees, agents, or volunteers acting within the course and scope of employment.

(c) Volunteer - Any person who of his own free will, provides goods or services to the named insured, with no monetary or material compensation as defined in Chapter 112, Part IV, Florida Statutes.

(d) Agent - Any person not an employee, acting under the direct control and supervision of a state agency or department, for the benefit of a state agency or department.

(e) Automobile - A land motor vehicle, motorcycle, trailer, or semi-trailer designed and licensed for use on public roads (including machinery or appuratus attached thereto), but does not include mobile equipment.

(f) Owned Automobile - An automobile owned by the named insured or leased under contract for six months or more.

(g) Hired Automobile - An automobile used under contract in behalf of or leased to the named insured, provided such automobile is not owned by or leased under contract for six months or more, or registered in the name of (1) the named insured, or (2) an employee or agent of the named insured who is granted an operating allowance for the use of such automobile.

(h) Non-owned Automobile - Any automobile which is not an owned or hired automobile.

(i) Trailer - The word trailer includes semi-trailer.

(j) Mobile Equipment - A land vehicle (including machinery or appuratus attached thereto), whether or not self-propelled: (1) not subject to motor vehicle registration, or (2) maintained for use exclusively on premises owned by or rented to the named insured, including the ways immediately adjoining, or (3) designed for use principally off public roads, or (4) designed or maintained for the sole purpose of affording mobility to equipment of the following types forming an integral part of or permanently attached to such vehicle; power cranes, shovels, loaders, diggers and drills; concrete mixers (other than the mix-in-transit type); graders, scrapers, rollers and other road construction or repair equipment; air compressors, pumps and generators, including spraying, welding and building cleaning equipment; and geophysical exploration and well-drilling equipment.

D. Exclusions

This certificate does not apply to:

(a) any claim or judgment for punitive damages;

(b) interest for the period prior to judgment;

(c) that portion of the claim or judgment which is in excess of the statutory limits of liability;

(d) any judgment entered personally against any insured where the insured was found to have acted in bad faith or with malicious purposes or in a manner exhibiting wanton and wilful disregard of human rights, safety, or property;

(e) liability assumed by the insured under any contract or agreement;

(f) any obligation for which the named insured or any carrier as his insurer may be held liable under workers'
compensation, unemployment compensation or disability benefits law, or under any similar law;

(d) the owner of a hired automobile or any agent or employee of any such owner;

(h) to any action which may be brought against the State department or agency named herein by anyone who unlawfully participates in riot, unlawful assembly, public demonstration, mob violence, or civil disobedience if the claim arises out of such riot, unlawful assembly, public demonstration, mob violence, or civil disobedience;

(i) damage or destruction to property owned by the insured;

(j) liability related in any way with nuclear energy.

E. Conditions

1. Premium

Premium charges shall be assessed in accordance with the provisions of Chapter 28A, Part II, Florida Statutes, and any rates promulgated thereunder, utilizing a retrospective rating arrangement premium calculation method whereby 80% of the premium is based on losses actually incurred by the insured and 20% is based on the changes in risk exposures (vehicles, etc.) of an insured. The premium must be paid promptly by an insured agency from its operating budget upon receiving the premium bill or invoice.

2. Insured's duties in the Event of Occurrence, Claim or Suit

(a) In the event of an occurrence, written notice containing particulars sufficient to identify the insured along with reasonably obtainable information with respect to the time, place and circumstances thereof, and the names and addresses of the injured and all known witnesses, shall immediately be given by or for the Insured to the Fund.

(b) If claim is made or suit is brought against the Insured, the Insured shall immediately forward to the Fund every demand, notice, summons, or other process received by him or his representative. Failure by the Insured to advise the Fund of a claim or suit prior to a settlement or agreement or the Insured otherwise obligating itself, shall void coverage by the Fund for that claim.

(c) The Insured shall cooperate with the Fund and, upon the Fund's request, assist in making settlements in the conduct of suits and in enforcing any right of contribution or indemnity against any person or organization who may be liable to the Insured because of injury or damage with respect to which coverage is afforded under this contract and the Insured shall upon request, make available all agency records pertaining to a specific claim, shall attend hearings and trials and assist in securing and giving evidence and obtaining the attendance of witnesses. The Insured shall not, except at his own cost, voluntarily make any payment, assume any obligation, or incur any expenses other than for first aid to others at the time of accident.

3. Limits of Liability

The limits of liability expressed as applicable to "each person" is the limit of the Fund's liability for all damages including damages for care and loss of services, arising out of bodily injury and properly damage sustained by one person as a result of any one occurrence; but the total liability of the Fund for all damages sustained by two or more persons as a result of any one occurrence shall not exceed the limit of liability as applicable to "each occurrence".

4. Insurance

If there is insurance applicable to any claim, the coverage extended by this certificate shall not apply, except as excess insurance over any and all other available coverage.

The Fund will pay to:

(a) any insured injured while occupying an owned vehicle;

(b) any other person injured while occupying the owned motor vehicle or while a pedestrian being struck by the owned motor vehicle, in accordance with the Florida Motor Vehicle No-Fault Law, the following benefits:

1. eighty percent (80%) of all reasonable and necessary medical expenses, and

2. sixty percent (60%) of all loss of gross income and loss of earning capacity per individual from inability to work proximately caused by bodily injury sustained by the injured person, plus all expenses reasonably incurred in obtaining from others ordinary and necessary services in lieu of those that, but for the injury, the injured person would have performed without income for the benefit of his household, and

3. funeral, burial or cremation expenses in an amount not to exceed $5,000.00 per individual, incurred as a result of bodily injury caused by an accident arising out of the ownership, maintenance or use of an owned motor vehicle.

B. Exclusions

This insurance does not apply:

(a) to an insured while occupying a motor vehicle of which the named insured is not the owner and which is not an owned motor vehicle under this coverage;

(b) to any person while operating the owned motor vehicle without the express or implied consent of the authorized person employed by the named insured;

(c) to any person, if such person's conduct contributed to his bodily injury under any of the following circumstances:

1. causing bodily injury to himself or herself intentionally or

2. while committing a felony;

(d) to the extent that benefits are paid or payable under any workers' compensation laws or Medicare program;

(e) to any pedestrian, other than an insured, not a legal resident of the State of Florida;

(f) to any person, including an insured, if such person is the owner of a motor vehicle with respect to which security is required under Florida's Motor Vehicle No-Fault Law;

(g) to any person, including an insured, who is entitled to personal injury protection benefits from the owner of a motor vehicle which is not an owned motor vehicle under this endorsement or from the owner's insurance;

(h) to any person who sustained bodily injury while occupying a motor vehicle located for use as a residence or premises;

(i) to any person who is incarcerated by the State, a ward of the State, or whose medical needs are otherwise provided for by the State of Florida or other governmental entity.

C. Limits of Liability: Other Insurance

Regardless of the number of persons insured, policies or bonds applicable, vehicles involved, or claims made, the total aggregated limit of personal injury protection benefits available under the Florida Motor Vehicle No-Fault Law from all sources combined, including this coverage, for all loss and expense incurred by or on behalf of any person who sustained bodily injury as the result of any one accident shall be $10,000.00, provided that payment for funeral, burial or cremation expenses paid in the foregoing shall not exceed $2,500.00. Any statutory changes in the amount of these benefits will automatically supersede the amount stated in this Certificate of Coverage.

If benefits have been received under the Florida Motor Vehicle No-Fault Law from any insurer for the same loss and expense for which benefits are available under this coverage, the Fund shall not be liable to make duplicate payments to or for the benefit of the injured person.

D. Definitions
III. GENERAL COVERAGE CONDITIONS

A. Audit

The Fund shall be permitted to examine and audit the insured’s books and records at any time during the term of this certificate and any extension thereof and within three years after the final termination of this certificate, as far as they relate to the premium bases or the subject matter of this certificate.

B. Action against the Fund

No action shall lie against the Fund unless, as a condition precedent thereto, the insured has fully complied with all of the terms of this certificate and the provisions of Section 768.26, Florida Statutes.

C. Severability of Interests

The form “the insured” is used severally and not collectively, but the inclusion herein of more than one insured shall not operate to increase the limits of the Fund’s liability.

D. Two or More Automobiles

The terms of this certificate apply separately to each automobile insured hereunder, but a motor vehicle and a trailer or semitrailer attached thereto shall be held to be one automobile as respects to limits of liability.

E. Term of Coverage

This certificate is issued for the purpose of confirming coverage as contemplated by Chapter 284, Part II, provisions or coverages in this certificate and the provisions of any Florida Statutes or laws including, but not limited to the aforesaid, the statutes and laws shall control.

F. Cancellation

Failure of the Fund to receive the amount of premiums billed to the insured agency within the time frame allowed by law may result in cancellation of the certificate of coverage. Payments must be made promptly from the insured’s operating budget upon receipt of the premium billed as specified in Section 284.26, Florida Statutes, and lack of prompt payment will result in a request from the Fund to the Comptroller to transfer premiums from any available funds of the delinquent agency under the provisions of Section 284.44(7), Florida Statutes.

G. Self-insurance Coverage

Coverage for defending and paying claims under this certificate is provided under the authority of Chapter 284, Florida Statutes, wherein the state is authorized to administer a self-insurance program. Provision of this certificate does not constitute the issuance of insurance other than on a self-insurance basis, and payment of any covered claim obligations is contingent upon availability of legislative funding.
# Automobile Accident Report

**State Liability Claims**  
Tallahassee, FL 32399-0338  

**RM File #:** [Blank]

## Insured State Agency

- **Department:** [Blank]
- **Bureau, Institution or District:** [Blank]
- **Location and Address:** [Blank]

## Insured Auto and Driver

- **Year:** [Blank]  
- **Make:** [Blank]  
- **Model:** [Blank]  
- **Tag No.:** [Blank]
- **Driver:** [Blank]  
- **Phone No.:** [Blank]
- **Employed by:** [Blank]  
- **Age:** [Blank]
- **Purpose of Use at Time of Accident:** [Blank]
- **Amount of Damage to Vehicle:** [Blank]

## Time and Place

- **Date of Accident or Loss:** [Blank]  
- **Hour:** [Blank]
- **Location of Accident:** [Blank]
- **Police Authority Investigating:** [Blank]

## Damage to Property of Others

- **Owner of Property Damage:** [Blank]
- **Address:** [Blank]  
- **Phone No.:** [Blank]
- **Driver of Other Vehicle:** [Blank]
- **Address:** [Blank]  
- **Phone No.:** [Blank]
- **Driver's License No.:** [Blank]

## If Automobile, Year, Make, Model, Tag No.

- **Year:** [Blank]  
- **Make:** [Blank]  
- **Model:** [Blank]  
- **Tag No.:** [Blank]

## Kind of Property and Extent of Damage

- [Blank]

## Insurance Carrier

[Blank]
### DEPARTMENT OF FINANCIAL SERVICES

**Division of Risk Management**

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<th>Address</th>
<th>Phone No.</th>
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**Persons Injured**

Nature and extent of injuries:

1.  
2.  
3.  
4.  

If doctor was called, give name:

Name: ______________________ Address: ______________________

Where was injured person taken:

By whom:

---

(USE BACK FOR ADDITIONAL COMMENTS)

Show on diagram position each car, vehicle, or injured person, indicating direction by arrow.

- **Sidewalk**

- **Center**

**Important**

If street or view obstructed in any way, indicate where and how; also indicate any street cars and traffic signal or signs.

Indicate points of compass.

DFS-D0-261, Rev, 11/05
Rule 6911-2.008

Page 2 of 3
Explain fully how accident occurred:

<table>
<thead>
<tr>
<th>Names of Witnesses</th>
<th>Address</th>
<th>Phone No.</th>
<th>State where witness was at time of accident</th>
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Date

Name of Person Filing Report

Name of Person Taking Report

Telephone Number of Caller

DFS-D0-261, Rev. 11/05
Rule 691-2.008

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