

_____ **POLICE ACADEMY**
POLICE VEHICLE OPERATIONS COURSE

To: Chief of Police / Public Safety Director

From: Director _____

Date: _____

Reference: Agency Vehicle for Police Vehicle Operations Training – Functional Area 7.0
Training dates - _____

This memo outlines the requirements of the Police Vehicle Operations Training for the Basic Recruit Class in which your trainee officer(s) are enrolled. Please ensure that these requirements are completed prior to the scheduled course dates listed above. Call _____ with any questions at _____.

- The practical behind-the-wheel training will take place at _____
- All trainees must have a valid driver's license, which must be verified by the sending agency.
- Each agency must provide a minimum of one vehicle with a police package (preferably marked) for every three trainees enrolled in the training.
- Remove all firearms and ammunition from the vehicles used for training, **this is mandatory**.
- All vehicle operating systems outlined in the attached Mechanical Certification Form, must be inspected and certified by the sending agency's mechanic and/or repair vendor no earlier than one business day prior to the first date of practical training. The completed Mechanical Certification Form is to be provided to the trainee who must bring the form with the vehicle on the first day of practical training. It is mandatory that the vehicle be inspected and certified to allow the vehicle to operate on the driving course.
- Brakes should have at least 75% of shoe and/or pad material on all four wheels. New brake shoes and/or pads are preferred
- Each vehicle must be equipped with four police rated tires with a minimum of 75% tread depth and **properly inflated to 40 PSI**. Remove all hub caps and trim rings and leave them at the sending agency.
- Each vehicle must have the following:
 - One new spare tire
 - Jack and lug wrench
 - One gallon of antifreeze
 - One quart of oil
 - Full tank of fuel
- All seat belts and occupant protection systems must be in proper operating condition.
- No loose items are to be left in the vehicle and trunk such as flashlights, shotguns, radar's, etc.

EVOC Vehicle Inspection Form

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MECHANICAL CERTIFICATION FORM

This form must be completed by the sending agency's mechanic or repair vendor to certify the proper and safe operating condition of the vehicle that will be used by the student/recruit in the driver training program. This form must be dated no earlier than one business day prior to the first date of practical training.

This completed form is mandatory to allow the vehicle to operate on the driving course.

Please print or type and complete the entire form

Law Enforcement Agency's Name: _____

Contact Person: _____ Phone Number: _____

VEHICLE INFORMATION

Make: _____ Model: _____ Year: _____ Mileage: _____ VIN #: _____

Registration: _____ Exp. Date: _____ State: _____ Unit #: _____

Vehicle Insurance ID #: (List *Self-Insured* or 3 digit number): _____ Policy #: _____ Exp. Date: _____

INSPECTION CHECKLIST

Power Train _____	Transmission _____	Driveshaft / Drive Axle _____
Cooling System _____	Hoses _____	Steering _____
Belts _____	Suspension _____	Exhaust System _____
Battery _____	Lights _____	Emergency lights and Siren _____
Seat Belts _____	All fluid levels (oil, trans, washer, etc) _____	

Tires (police/speed rated min. 75% tread)-please indicate if new or percent of tread remaining. All tires must be the same make.
Right Front _____ Left Front _____ Right Rear _____ Left Rear _____ Spare _____

Brakes, new pads / shoes are recommended, 75% condition is within acceptable limits.
Please indicate if new or percent of pad/shoe material remaining Front Axle _____ Rear Axle _____

I attest that the vehicle listed above has had all of the indicated items and operating systems/components inspected and/or replaced. This vehicle is certified for use in the Emergency Vehicle Operations Course.

Print Name: _____ Signature: _____ Date: _____

In case of vehicle breakdown notify: _____ Phone Number: _____

Replacement vehicle: Number: _____ Make: _____ Model: _____ (Leave blank) VIN #: _____
