

ANNUAL NOTICE TO HIGH-MILEAGE DRIVERS

Purpose: All employees who are expected to drive an average of 10,200 or more official reimbursable miles per year must use this form to make a written commitment stating whether they will drive a Government-furnished owned/leased vehicle (GOV) or their privately owned vehicle (POV).

Name of Employee: (First, Last)	Title/Position:
Residence: (Street Address, City, State and Zip Code)	Duty Station:

It is expected that your automobile mileage to carry out your official assignments, including any expected rotations and details during the fiscal year, will average 10,200 or more official reimbursable miles per year. This automatically places you in a high-mileage driver category, and you are, thus, required to complete one of the commitments in section B.

SECTION A - MILEAGE COMPUTATION

1. Annual estimated work assignment mileage:		Drivers: Mileage entered is subject to verification and will be used for the basis of approval or denial of a GOV.
2. Annual estimated "reimbursable home to home" mileage:		
3. Annual total estimated mileage:		Supervisors: Must validate estimated mileage entered by the employee. If employee qualifies as a high-mileage driver, sign form, and forward to Resource Management Staff (RMS).
4. Average estimated monthly mileage: (Divide line 3 by 12)		

SECTION B - COMMITMENT

Note: The mileage rates covered by this section are subject to change. In the event there is a mileage change after the commitment was submitted, the driver can resubmit the commitment within 60 days of the notice of the implemented change. (For example: a driver submits a commitment to drive their POV or GOV and there is a mileage rate change or a mileage threshold change, the driver can change their commitment mid-term.)

Please Select One of the Following:

1. I am currently driving a GOV and elect to continue to do so for official travel during the fiscal year stated above. The tag number of my assigned GOV is: _____
2. I am requesting a GOV be assigned to me on a continuous basis for official travel from the date of assignment of the vehicle, unless there is a change of official duty station.
 - a. After a GOV is assigned to me, I will be required to drive it on a continuous basis for official travel from the date of assignment of the vehicle, unless there is a change of official duty station.
 - b. By signing the commitment, I understand that if a GOV cannot be made available to me, I will be reimbursed at the higher mileage rate authorized by the Federal Travel Regulations (FTR) for the use of my POV). When this rate is used, the following will be included on my travel voucher: "Commitment to us a GOV e-signed on _____, but a GOV has not been provided to me. I will receive the higher POV reimbursable rate."*
mm/dd/yyyy
 - c. If a GOV is requested from GSA to be assigned to me, but I turn down the vehicle or on occasion I choose to use my POV for personal convenience, I understand I will be reimbursed at the lowest reimbursable rate outlined in 41 CFR 301-10.310 (FTR).
 - d. FSIS policy on GOV assignment is as follows: If the garaged zip code is located within 5 miles or 15 minutes of a fueling station that offers E85, a subcompact bi-fuel sedan will be requested from GSA. If the garaged zip code is not within 5 miles or 15 minutes of a fueling station that offers E85, then a subcompact gasoline vehicle will be requested from GSA.
3. I elect to drive my POV for official travel on a continuous basis during a 12 month commitment period. By signing this commitment, I understand the rate will be based upon the average mileage cost for use of a GOV as authorized by 41 CFR 301-10.310 (FTR). When this rate is used, the following will be included on my travel voucher. " I have made a commitment to use my POV at the lower reimbursable rate." *
4. I must drive my POV for official travel on a continuous basis during a 12 month commitment period or as directed by FSIS leadership. By signing this commitment, I understand that I will receive the lower POV reimbursable rate.

***Rate authorized by 41 CFR 301-10.310 (FTR), subject to change each January.**

Employee Signature: <div style="border: 1px solid black; height: 20px; width: 100%;"></div>	Date: (mm/dd/yyyy)
Supervisor's Signature: <div style="border: 1px solid black; height: 20px; width: 100%;"></div>	Date: (mm/dd/yyyy)