



USAG Livorno Directorate of Logistics TRANSPORTATION OFFICE

- Driver's Study Book**
- Driver's Information's Book**

DRIVING TESTING SECTION (DTS)

Duty Hours & Classes:

Monday-Friday 08:00-17:00

Lunch Time Closure 12:30-13:30

POV License Classes, WED & THU 14:00

GOV License Classes, TUE 09:00 & 10:00

**Produced by Laura Pisani Laura and Gianluca Farnesi
USAG Livorno Directorate of Logistics**

INTRODUCTION

- POV & GOV license, Application Form AESE 190-2A
- POV Driver's Study Guide
- Italians and European signs
- Test practice exercise
- PMCS check list, Non-Tactical Vehicles (filling sample)
- DA Form 2404, Equipment Inspection and Maintenance Worksheet (filling sample)
- Motor Equipment Utilization Record, (filling instruction)
- Request for Mission Dispatch
- Request for Mission Dispatch (filling sample)
- Instruction to be followed in case of Accident
- Motor Vehicle Accident Report, Standard Form 91
- Standard Form 91 (filling sample)
- Drivers Responsibilities driving GSA vehicles
- Border Cross Authorization crossing Italian Border
- IDP (International Driver Permit)
- How to obtain an A.F.I. Motorcycle Endorsement
- Temporary authorization to drive
- Motorcycle PPE
- Important Telephone Numbers
- Tuscany, Map

| | |
|---|--------------------|
| APPLICATION FOR POV AND MILITARY OPERATOR'S LICENSE (USASETAF Reg 190-2) See Privacy Act Statement Below | DATE OF SUBMISSION |
|---|--------------------|

REQUEST ISSUE OF ONE OF THE BELOW TYPE OPERATOR'S PERMITS: (CIRCLE THE PERMIT TYPE REQUESTED)

| | | |
|----------|---|-------------------|
| Type I | MOPED OR SCOOTER Below 50CC, Age of 16 and above | Duplicate/Renewal |
| Type II | SCOOTER AND MOTORCYCLE 51CC and above or up to 25KW/35HP, age of 18 and above | Duplicate/Renewal |
| Type III | MOTORCYCLE above 25KV/35HP, three years of verifiable experience | Duplicate/Renewal |
| Type V | AUTOMOBILE ONLY - Age 18 and above | Duplicate/Renewal |
| Type LP | LEARNERS PERMIT - Age 18 and above | Duplicate/Renewal |

APPLICANT'S personal data information must be true, complete and correct. Providing false information or erroneous information may be grounds for denial or withdrawal of license. THIS IS THE INFORMATION WHICH WILL BE ENTERED ON THE PERMIT.

| | | | | | |
|---|--------------|-----------------------|-------------------------------|--|-----|
| LAST NAME | | FIRST NAME | | MIDDLE NAME | |
| RANK/GRADE | SSN | UNIT | | UNIT TELEPHONE | |
| DATE OF BIRTH (Day / Month-Spell Out / Year) | | PLACE OF BIRTH (City) | | STATE | SEX |
| HEIGHT (Feet and Inches) | WEIGHT (Lbs) | COLOR HAIR | COLOR EYES | GLASSES/CONTACTS Worn while driving Y/N | |
| U.S./EUROPEAN CMD/WESTERN EUROPEAN DRIVERS LICENSE NUMBER | | | ISSUING STATE/COMMAND/COUNTRY | | |
| CIVILIAN OR NATO PASS NUMBER | | | SIGNATURE OF APPLICANT | | |

SPONSOR'S STATEMENT : This applicant is my dependent and has my consent to obtain the permit requested.

| | | | | | |
|------------|------|----------------|----------------------|-------------|--|
| LAST NAME | | FIRST NAME | | MIDDLE NAME | |
| RANK/GRADE | UNIT | UNIT TELEPHONE | SIGNATURE OF SPONSOR | | |

I have reviewed this application and, having personally interviewed the applicant, find him/her a responsible individual and fully qualified IAW the criteria set forth in Section III, USASETAF Reg 190-2, to possess a motor vehicle license.

Signature of E-7 or GS7 or above _____

_____ Printed Name _____ Rank/Grade _____ Unit of Person Signing

PRIVACY ACT STATEMENT

Authority: Required under provisions of NATO Treaty regarding the status of Forces as agreed by the U.S. Senate 15 July 53 (4 U.S.T. 1973 T.I.A.S. 2846) and NAVSUPACT, Naples INST 11240.19c. Principal Purpose(s): To obtain permission for and information required by U.S. and Italian Authorities from personnel who desire a USASETAF POV Driver's License. The SSN is used for law enforcement purposes as an additional means of identification to ensure correct identification of operator. Routine Uses: Information is used to meet the requirement of U.S. and Italian Law, and is gathered for law enforcement purposes. The SSN provides interface with the standard Installation/Division System and is a major item used in processing machine record and output sequence for Military Police management information systems. Disclosure: Disclosure is voluntary for military and civilians, however if this information is not provided, USASETAF Operator's License cannot be issued.



SETAF POV AND GOVERNMENT DRIVER'S LICENSE

1. AESE FORM 190-2a Signed by Unit Commander.
(GS-07/E-7 and above can sign for themselves)
2. COPY OF STATESIDE LICENSE
3. COPY OF ORDERS FOR MILITARY AND CIVILIANS.
LETTER OF EMPLOYMENT FOR LOCAL HIRE
CIVILIANS

All candidates need to sign in and pick up forms at TMP-1 prior to the day of Driver's Orientation Class & Test

Classes are held at TMP-1 every Wednesday and Thursday at 14:00

Driving Testing Section is located at TMP-1, Bldg 703.

POC: Mr. Gianluca Farnesi DSN 633-8161

E-mail Gianluca.Farnesi@eur.army.mil



POV DRIVER'S STUDY GUIDE










Located on the web at the following link:










<http://www.usag.livorno.army.mil>

Select **Newcomers** from the top-menu









Select: **Driving in Italy**









WARNING/DANGER SIGNS

| | |
|--|---|
| <p>Danger. Posted before dangerous areas (for example, construction sites).</p> |  |
| <p>Double Curve. Indicates a double curve and its directions.</p> |  |
| <p>Single Curve. Indicates a single curve and its direction.</p> |  |
| <p>Falling Rocks. Indicates stretches of road where there is danger of falling rocks</p> |  |
| <p>Slippery Road. Indicates stretches of road that may be slippery when wet or dirty.</p> |  |
| <p>Loose Gravel. Indicates a stretch of road that has loose surface material. Reduce speed and increase distance from the vehicle in front.</p> |  |
| <p>Quay or River Bank. Posted near areas where there is danger of vehicles leaving the road and entering a body of water.</p> |  |
| <p>Pedestrian Crosswalk. Indicates an upcoming pedestrian crosswalk.</p> |  |
| <p>Wild Animal Crossing. Indicates wild animals may cross the road.</p> |  |

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| <p>Bicycle Crossing. Indicates that cyclists may be crossing the road.</p> |  |
| <p>Dangerous Downgrade. Posted before steep downgrades; indicates degree of downgrade.</p> |  |
| <p>Men at work Indicates men at work ahead</p> |  |
| <p>Rough Road. Indicates uneven stretches of road.</p> |  |
| <p>Signal Lights. Indicates traffic light ahead.</p> |  |
| <p>Children. Posted where children may cross the street, particularly near schools or playgrounds</p> |  |
| <p>Drawbridge. Indicates a drawbridge ahead.</p> |  |
| <p>Unguarded Railroad Crossing. Posted 240 meters before an unguarded railroad</p> |  |
| <p>Guarded Railroad Crossing. Posted 240 meters before a guarded railroad crossing</p> |  |

PROHIBITED SIGNS










| | |
|---|---|
| <p>Entry Prohibited. Prohibits entry for all types of vehicles. Posted at the end of one-way streets to prevent entry of vehicles from the wrong direction.</p> |  |
| <p>Road Closed/Entry Prohibited. Prohibits entry for all types of vehicles. A sign reading <i>RESIDENTI</i> posted underneath the disk means that entry is permitted only to people who reside or have business on the street.</p> |  |
| <p>No Passing. Prohibits passing motor vehicles other than two-wheeled vehicles (bicycles and motorcycles).</p> |  |
| <p>No Passing. Prohibits trucks with a gross weight of over 3.5 tons and trucks or tractors pulling trailers to pass vehicles, except for two-wheeled vehicles.</p> |  |
| <p>End of No-Passing Zone. Indicates the end of a no-passing zone for motor vehicles</p> |  |
| <p>End of No-Passing Zone. Indicates the end of a no-passing zone for trucks</p> |  |
| <p>Speed Limit. Indicates the maximum speed allowed.</p> |  |
| <p>End of Speed Limit. Indicates the end of a speed-limit zone</p> |  |

| | |
|--|---|
| <p>Motor Vehicles Prohibition. Prohibits entry for all motor vehicles other than motorcycles</p> |  |
| <p>Maximum Weight Allowed. Indicates the maximum gross vehicle weight, in tons, permitted to proceed beyond this sign.</p> |  |
| <p>Maximum Width Allowed. Posted before narrow places in the road (for example, bridges, tunnels); indicates the maximum vehicle width, in meters, of vehicles that may pass through the area</p> |  |
| <p>Maximum Height Allowed. Posted before low-clearance structures (for example, bridges, overpasses); indicates the vehicle maximum height, in meters, of vehicles that may pass under the structure.</p> |  |
| <p>Maximum Length Allowed. Prohibits trucks that exceed the maximum length allowance indicated on the sign</p> |  |
| <p>Motorcycles Prohibited. Prohibits entry for motorcycles with or without sidecar, mopeds, or motor-assisted cycles.</p> |  |
| <p>No Stopping. Indicates drivers may not stop</p> |  |
| <p>Restricted No Stopping. Indicates drivers may not stop or park for longer than 3 minutes.</p> |  |

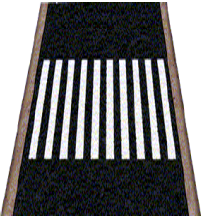


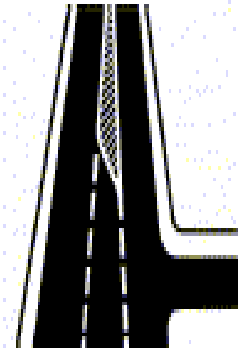



MANDATORY SIGNS


















































| | |
|---|---|
| <p>Mandatory Direction of Travel. Indicates that traffic must proceed straight ahead. No turns are permitted</p> |  |
| <p>Mandatory Direction of Travel. Indicates that traffic may proceed straight ahead or turn right, but may not turn left</p> |  |
| <p>Traffic Circle. Indicates entrance to a traffic circle. Traffic in the circle has the right-of-way. Directional signals are not required when entering, but must be used when exiting the circle.</p> |  |
| <p>Mandatory Direction of Travel. Indicates that traffic must turn right</p> |  |
| <p>Bicycles Only. Indicates paths restricted to and mandatory for bicycles</p> |  |
| <p>Pedestrians Only. Indicates areas restricted to and mandatory for pedestrians</p> |  |
| <p>Bus Lane. Indicates a road restricted to buses</p> |  |
| <p>Snow Chains Mandatory. Posted where snow chains are required. The speed limit on roads marked by this sign is 50 kilometers per hour (kph) (31 miles per hour (mph)</p> |  |

RIGHT OF WAY SIGNS

| | |
|---|---|
| <p>Yield Right-of-Way. Indicates driver must yield to traffic on the upcoming priority road. If necessary stop before proceeding.</p> |  |
| <p>Stop. Indicates driver must come to a complete stop before proceeding.</p> |  |
| <p>Crossroads. Indicates an intersection or junction. Yield to traffic approaching from the right.</p> |  |
| <p>Priority Road. Indicates that traffic on this road has the right-of-way only at the next intersection. Signs are placed immediately before intersections in city limits and approximately 150 to 250 meters before intersections outside city limits.</p> |  |
| <p>Oncoming Traffic. Posted where oncoming traffic normally is not expected (for example, autobahns, and construction sites).</p> |  |
| <p>Priority Road. Indicates that traffic on this road has the right-of-way over traffic entering this road at unmarked intersections. Outside of cities and communities, parking on a priority road is prohibited.</p> |  |
| <p>End of Priority Road. Indicates the end of the priority road and the end of right-of-way</p> |  |
| <p>Oncoming Traffic Must Wait. Indicates that oncoming traffic (red arrow) must yield to traffic traveling in the opposite direction (white arrow).</p> |  |
| <p>Yield to Oncoming Traffic. Indicates that oncoming traffic (black arrow) has the right-of-way. Traffic traveling in the direction of the red arrow must yield to oncoming traffic.</p> |  |













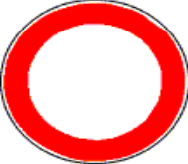















PAVEMENTS MARKS

| | | | |
|--|---|--|---|
| <p>Pedestrian Crosswalk. Painted over a crosswalk. If a traffic island is in the middle of the crosswalk, the stripes on either side of the island are separate crosswalks. Stopping or parking on or within 5 meters of a pedestrian crosswalk is prohibited</p> |  | <p>No Parking. Painted on the road in a zig-zag pattern to indicate areas where parking or stopping is prohibited</p> |  |
| <p>Solid White Line. Prohibits traffic from passing on either side of the solid white line. Vehicles must not cross the solid white line, nor is it authorized for motorcyclists to lean over the line. Where a solid white line is used to mark the edge of the road, it is prohibited to stop or park on the left side of the line.</p> |  | <p>Broken White Line. Used to mark traffic lanes or the center of the road. The broken line may be crossed only if passing can be done safely.</p> |  |
| <p>Solid and Broken White Line. Indicates that passing is allowed for drivers on the side of the broken line and prohibited for drivers on the side of the solid line</p> |  | <p>Directional Arrows. Painted on the road in front of an intersection to warn drivers to position their vehicles in the correct lane. If the arrows are between solid white lines (marked traffic lanes), the direction indicated must be followed once in the lane. Stopping or parking in a lane marked with arrows between solid white lines is prohibited.</p> |  |
| <p>Broken White Line. Used to mark traffic lanes or the center of the road. The broken line may be crossed only if passing can be done safely.</p> |  | | |


















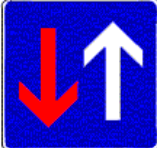










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|  |  |  |  |  |  |  |  |  |  |  |  | FOR SAFETY You must KNOW German traffic signs <small>USAREUR POSTER 19H-34-12, Jan. 2001 (supercedes USAREUR Poster 19H-34, Nov 95)</small> http://www.hqusaeur.army.mil | | | | |
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EXERCISES FOR PREPARATION OF TEST

ROAD SIGNS

| | | | | | | | |
|---|---|----|---|----|--|----|---|
| 1 |  | 8 |  | 15 |  | 22 |  |
| 2 |  | 9 |  | 16 |  | 23 |  |
| 3 |  | 10 |  | 17 |  | 24 |  |
| 4 |  | 11 |  | 18 |  | 25 |  |
| 5 |  | 12 |  | 19 |  | 26 |  |
| 6 |  | 13 |  | 20 |  | 27 |  |
| 7 |  | 14 |  | 21 |  | 28 |  |

EXERCISES FOR PREPARATION OF TEST

| | | | | | | | |
|-----------|---|-----------|---|-----------|--|-----------|---|
| 29 |  | 36 |  | 43 |  | 50 |  |
| 30 |  | 37 |  | 44 |  | 51 |  |
| 31 |  | 38 |  | 45 |  | 52 |  |
| 32 |  | 39 |  | 46 |  | 53 |  |
| 33 |  | 40 |  | 47 |  | 54 |  |
| 34 |  | 41 |  | 48 |  | 55 |  |
| 35 |  | 42 |  | 49 |  | 56 |  |

TEST EXERCISE

EXERCISES FOR PREPARATION OF TEST

| | |
|--------------------------------------|--|
| STOP | MAXIMUM WIDTH ALLOWED |
| DISTANCE TO GUARDED RAILROAD CROSS | NO PASSING FOR TRUCKS |
| YIELD RIGHT OF WAY | MINIMUM SPEED LIMIT |
| ONE WAY STREET | MAXIMUM HEIGHT ALLOWED |
| QUEUE (TRAFFIC JAM) | ENTRY PROHIBITED |
| PROHIBITED FOR ALL VEHICLES | PARKING AREA |
| DANGER | ONCOMING TRAFFIC MUST WAIT |
| UNGUARDED RAILROAD CROSSING | MAXIMUM SPEED LIMIT |
| ROAD NARROW | CROSSROADS |
| MAXIMUM WEIGHT ALLOWED | END OF SPEED LIMIT |
| DANGEROUS DOWNGRADE | PEDESTRIAN CROSSWALK AHEAD |
| PEDESTRIAN CROSSWALK | ONCOMING TRAFFIC (2 WAY STREET) |
| END OF PRIORITY ROAD | RIGHT OF WAY AHEAD |
| NO STOPPING | GUARDED RAILROAD CROSSING |
| NO PASSING | MANDATORY DIRECTION OF TRAVEL |
| CHILDREN | RESTRICTED NO STOPPING |
| TRAFFIC ACCIDENT AHEAD | DOUBLE CURVE |
| TRAFFIC CIRCLE AHEAD | ONCOMING TRAFFIC HAS RIGHT OF WAY |
| ABSOLUTE PRIORITY ROAD | BICYCLE ONLY |
| CUSTOMS CONTROL | END OF NO PASSING ZONE FOR TRUCKS |
| CONSTRUCTION SITE | NO PARKING |
| SINGLE CURVE | DRAWBRIDGE AHEAD |
| ROUGH ROAD | FIRST AID STATION |
| END OF NO PASSING ZONE | TRUCKS AND TRACTORS PROHIBITED |
| SLIPPERY ROAD | PRIORITY ROAD WHEN ENTERING FROM RIGHT |
| SIGNAL LIGHT AHEAD | LOW FLY AIRCRAFT |
| WILD ANIMAL CROSSING | SIDE WIND |
| ONE WAY STREET IN DIRECTION OF ARROW | FIRE HIGH RISK AREA |

TEST CORRECTION

EXERCISES FOR PREPARATION OF TEST

| | | | |
|----|--------------------------------------|----|--|
| 26 | STOP | 31 | MAXIMUM WIDTH ALLOWED |
| 21 | DISTANCE TO GUARDED RAILROAD CROSS | 27 | NO PASSING FOR TRUCKS |
| 30 | YELD RIGHT OF WAY | 14 | MINIMUM SPEED LIMIT |
| 52 | ONE WAY STREET | 54 | MAXIMUM HEIGHT ALLOWED |
| 11 | QUEUE (TRAFFIC JAM) | 15 | ENTRY PROHIBITED |
| 4 | PROHIBITED FOR ALL VEHICLES | 24 | PARKING AREA |
| 37 | DANGER | 40 | ONCOMING TRAFFIC MUST WAIT |
| 8 | UNGUARDED RAILROAD CROSSING | 38 | MAXIMUM SPEED LIMIT |
| 17 | ROAD NARROW | 48 | CROSSROADS |
| 42 | MAXIMUM WEIGHT ALLOWED | 55 | END OF SPEED LIMIT |
| 56 | DANGEROUS DOWNGRADE | 23 | PEDESTRIAN CROSSWALK AHEAD |
| 22 | PEDESTRIAN CROSSWALK | 41 | ONCOMING TRAFFIC (2 WAY STREET) |
| 44 | END OF PRIORITY ROAD | 45 | RIGHT OF WAY AHEAD |
| 29 | NO STOPPING | 3 | GUARDED RAILROAD CROSSING |
| 6 | NO PASSING | 5 | MANDATORY DIRECTION OF TRAVEL |
| 16 | CHILDREN | 18 | RESTRICTED NO STOPPING |
| 36 | TRAFFIC ACCIDENT AHEAD | 32 | DOUBLE CURVE |
| 51 | TRAFFIC CIRCLE AHEAD | 25 | ONCOMING TRAFFIC HAS RIGHT OF WAY |
| 35 | ABSOLUTE PRIORITY ROAD | 47 | BICYCLE ONLY |
| 13 | CUSTOMS CONTROL | 20 | END OF NO PASSING ZONE FOR TRUCKS |
| 12 | CONSTRUCTION SITE | 50 | NO PARKING |
| 7 | SINGLE CURVE | 39 | DRAWERIDGE AHEAD |
| 19 | ROUGH ROAD | 9 | FIRST AID STATION |
| 20 | END OF NO PASSING ZONE | 34 | TRUCKS AND TRACTORS PROHIBITED |
| 43 | SLIPPERY ROAD | 2 | PRIORITY ROAD WHEN ENTERING FROM RIGHT |
| 10 | SIGNAL LIGHT AHEAD | 33 | LOW FLY AIRCRAFT |
| 1 | WILD ANIMAL CROSSING | 28 | SIDE WIND |
| 46 | ONE WAY STREET IN DIRECTION OF ARROW | 49 | FIRE HIGH RISK AREA |

Non- Tactical Vehicle PMCS Checklist

SAMPLE

| | | |
|------------------------------------|------------------------|------------------------|
| STARTING DATE: 01-ott-08 | ADMIN# L0834 | USA# CT 3977 |
|------------------------------------|------------------------|------------------------|

1 PRIOR TO OPERATION / PRIMA DI FUNZIONAMENTO

| | 01-ott | 01-ott | | | | | | | |
|--|--------|--------|--|--|--|--|--|--|--|
| a. Check vehicle for damages / Verificare eventuali danni al veicolo (Report damages immediately to Truckmaster!)(notificare il danno immediatamente al supervisore!) | X | X | | | | | | | |
| b. Check windows for cracks and cloudiness / Verificare eventuali crepe o bozze di tutti i vetri del veicolo | X | X | | | | | | | |
| c. Check headlights, taillights, brake lights and turn signals / Controllare luci posizione, anabbaglianti,abbaglianti,frecce,stop e retromarcia | X | X | | | | | | | |
| d. Check and adjust mirrors / Controllare e regolare gli specchi | X | X | | | | | | | |
| e. Check windshield wiper, windshield washer and horn / Controllare spazzole tergicristallo, liquido lavavetro e clacson | X | X | | | | | | | |
| f. Check tires (incl. spare) for cracks, bubbles or bears, proper pressure and tread /Controllare stato delle gomme(incluso ruota di scorta)della pressione, eventuali difetti delle gomme in uso | X | X | | | | | | | |
| g. Check for puddles under vehicle, i.e. coolant, oil, etc./ Controllo macchie sospette sotto al veicolo(acqua,olio ect) | X | X | | | | | | | |
| h. Check oil level of the engine / Contollo livello olio motore | X | X | | | | | | | |
| i. Check coolant level / Contollo livello vaschetta liquido di raffreddamento | X | X | | | | | | | |
| j. Check water hoses and fan belt / Contollo tubi acqua radiatore e cinghia ventole raffreddamento motore | X | X | | | | | | | |
| k. On vehicles with air-breaks - air-valve released and the maximum air pressure must be gained before departing / Veicoli con freni ad aria- prima di partire assicurarsi che i freni devono avere la max pressione | X | X | | | | | | | |
| l. Check if jack, wrench, warning triangle first-aid kit and warning vest are in the vehicle /Contollo se il veicolo dispone di equipaggiamento per il cambio ruota,triangolo e giubbotto di sicurezza | X | X | | | | | | | |

Need Oil

2 WHILE ENGINE IS RUNNING / CON IL MOTORE ACCESO

| | | | | | | | | | |
|--|---|---|--|--|--|--|--|--|--|
| a. Check transmission fluid - only vehicles with automatic transmission / Contollo liquido trasmissione(veicolo automatico) | X | X | | | | | | | |
| b. Watch for sparks, leaks (water, oil), smoke and missing ignition, engine knocks / Contollo candele,perdite(acqua,olio) fumo o mancata messa in moto o motore rumoroso ALL DEFICIENCIES MUST BE CORRECTED PRIOR TO DEPARTURE. (REPORT TO DISPATCH OFFICE) / TUTTE LE PROBLEMATICHE RELATIVE AL VEICOLO DEVONO ESSERE MESSE A PUNTO PRIMA DI PARTIRE (notifica al tuo dispatcher) | X | X | | | | | | | |

3 DURING THE OPERATION / DURANTE LA GUIDA

| | | | | | | | | | |
|--|---|---|--|--|--|--|--|--|--|
| a. Watch for brakes pulling to one side or being mushy / rumori per freni che fischiano o veicolo tira a dx o sx | X | X | | | | | | | |
| b. Watch for play in steering / Eventuale gioco di sterzo | X | X | | | | | | | |
| c. In case of warning lights coming on - stop and check coolant, oil, battery and fan belt/ In caso di qualche luce di pericolo si accende fermarsi e controllare liquido di vaschetta radiatore,olio,batteria,cinghia ventole di raffreddamento | X | X | | | | | | | |
| d. Watch for unusual noises / Eventuali e inusuali rumori | X | X | | | | | | | |
| e. Watch for proper function of the clutch / Eventuali malfunzionamenti della frizione (per veicoli cambio manuale) | X | X | | | | | | | |

4 AT HALTS / IN SOSTA

| | | | | | | | | | |
|--|---|---|--|--|--|--|--|--|--|
| a. Clean windows and lights as needed / Pulire vetri e luci al bisogno | X | X | | | | | | | |
| b. Check for leaks and smoke / Contollo perdita liquido ed eventuale odore o fumo sospetto | X | X | | | | | | | |

5 AFTER OPERATION / LE OPERAZIONI DA EFFETTUARE A FINE GIORNATA

| | | | | | | | | | |
|---|---|---|--|--|--|--|--|--|--|
| a. Check hoses / Contollo tubi acqua radiatore | X | X | | | | | | | |
| b. Check fan belt / Contollo cinghia ventola raffreddamento | X | X | | | | | | | |
| c. Check battery / Contollo stato batteria | X | X | | | | | | | |
| d. Check exhaust system / Controllare intero stato marmitta | X | X | | | | | | | |
| e. Check oil level of power steering / Controllate liquido olio sterzo | X | X | | | | | | | |
| f. Refuel vehicle. Ensure you fill up the proper fuel! /Rifornimento veicolo. Sicuri di rifornirlo con il giusto carburante | X | X | | | | | | | |
| g. Wash vehicle and clean interior / Lavaggio veicolo esterno ed interno | X | X | | | | | | | |
| h. Check oil level (wait 5 minutes) / Controllare liquido olio dopo 5 minuti | X | X | | | | | | | |
| i. Vehicles with air brakes: Drain air tanks / Veicoli con freni ad aria: controllare perdite aria tubi in pressione | X | X | | | | | | | |

Name: _____ Signature: _____

SFC HALL (signature)

Mr. Farnesi (signature)

REMARKS: Added one quarter of Oil (Driver Signature)

EQUIPMENT INSPECTION AND MAINTENANCE WORKSHEET

For use of this form, see DA PAM 738-750 and 738-751; the proponent agency is DCSLOG

| | | | | | | | |
|---|--------------------|-----------------|------------------------|--|--------------------|-------------------------------|--|
| 1. ORGANIZATION DDRT-MI | | | | 2. NOMENCLATURE AND MODEL M2A2 BRADLEY 2350-01-248-7619 | | | |
| 3. REGISTRATION/SERIAL/NSN MV062K 2AD22466 | 4a. MILES 17011 | b. HOURS N/A | c. ROUNDS FIRED N/A | d. HOT STARTS N/A | 5. DATE 9-28-05 | 6. TYPE INSPECTION RECEIPT | |

| 7. APPLICABLE REFERENCE | | | |
|---------------------------------|-----------------|---------------------------------|------------------|
| TM NUMBER TM 9-2350-284-24P1 | TM DATE 2-97 | TM NUMBER TM 9-2350-284-24P2 | TM DATE 10-94 |

COLUMN a - Enter TM item number.
 COLUMN b - Enter the applicable condition status symbol.
 COLUMN c - Enter deficiencies and shortcomings.

COLUMN d - Show corrective action for deficiency or shortcoming listed in Column c.
 COLUMN e - Individual ascertaining completed corrective action initial in this column.

STATUS SYMBOLS

"X" - Indicates a deficiency in the equipment that places it in an inoperable status.
 CIRCLED "X" - Indicates a deficiency, however, the equipment may be operated under specific limitations as directed by higher authority or as prescribed locally, until corrective action can be accomplished.
 HORIZONTAL DASH "-" - Indicates that a required inspection, component replacement, maintenance operation check, or test flight is due but has not been accomplished, or an overdue MWO has not been accomplished.

DIAGONAL "/" - Indicates a material defect other than a deficiency which must be corrected to increase efficiency or to make the item completely serviceable.
 LAST NAME INITIAL IN BLACK, BLUE-BLACK INK, OR PENCIL - Indicates that a completely satisfactory condition exists.
 FOR AIRCRAFT - Status symbols will be recorded in red.

ALL INSPECTIONS AND EQUIPMENT CONDITIONS RECORDED ON THIS FORM HAVE BEEN DETERMINED IN ACCORDANCE WITH DIAGNOSTIC PROCEDURES AND STANDARDS IN THE TM CITED HEREON.

| | | | | |
|--|----------|--|----------|-----------------------|
| 8a. SIGNATURE <i>MELVIN S. LEVINSKY</i> | 8b. TIME | 9a. SIGNATURE <i>(Maintenance Supervisor)</i> | 9b. TIME | 10. MANHOURS REQUIRED |
|--|----------|--|----------|-----------------------|

| TM ITEM NO. <i>a</i> | STATUS <i>b</i> | DEFICIENCIES AND SHORTCOMINGS <i>c</i> | CORRECTIVE ACTION <i>d</i> | INITIAL WHEN CORRECTED <i>e</i> |
|---|--------------------|---|-----------------------------------|------------------------------------|
| 1. | MISS | DOUBLE ANGLE BRACKET | 5340-01-306-4197 208.00 | |
| 2. | MISS | ARMOR, SUPPLEMENTAL | 2540-01-271-0338 EST. COST 112.00 | |
| 3. | MISS | ARMOR, SUPPLEMENTAL | 2540-01-271-0340 EST. COST 193.00 | |
| SAMPLE | | | | |
| Expenditure for parts and manhours will be in accordance with Reliability Centered Maintenance (RCM) concept. Vehicle Tied for missing parts and parts damaged beyond repair. | | | | |
| Ref: TB9-2350-389-50 Fed Log SEPT 05 | | | | |

REQUEST FOR MISSION DISPATCH

(For use of this form see USASETAF Suppl 1 to USAREUR Reg 58-1)

SECTION I - REQUIREMENT

| | | |
|-------------------|-------|-------------------|
| TO: TMP | FROM: | DATE: [dd-MMM-yy] |
|-------------------|-------|-------------------|

| |
|----------------------------|
| 1. SERVICE TO BE PERFORMED |
|----------------------------|

| | |
|------------------------|------------------|
| 2. NUMBER OF PASSENGER | 3. TYPE OF CARGO |
|------------------------|------------------|

| | | |
|-----------------------------|--------------------------|--------------------------------------|
| 4. TYPE OF VEHICLE REQUIRED | 5. DATE VEHICLE REQUIRED | 6. TIME VEHICLE REQUIRED: [hh:mm] |
|-----------------------------|--------------------------|--------------------------------------|

| | | |
|--------------------|----------------|--------------------|
| 7. PLACE TO REPORT | 8. DESTINATION | 9. MILEAGE ONE WAY |
|--------------------|----------------|--------------------|

| | | |
|-----------------------------|-------------------|------------------------|
| 10. DATE AND TIME OF RETURN | 11. OFFICIAL USER | 12. POC – PHONE NUMBER |
|-----------------------------|-------------------|------------------------|

| | |
|---------------------|---|
| 13. NAME OF DRIVER* | 14. ASSISTANT DRIVER REQUIRED PROVIDED BY |
|---------------------|---|

| | | | |
|---------------------------------------|--------------------------|-----|-----------------------------|
| 15. ADDITIONAL REQUIREMENT | | | |
| A. MONEY FOR AUTOSTRADA TOLL REQUIRED | <input type="checkbox"/> | YES | <input type="checkbox"/> NO |
| B. POL COUPONS REQUIRED | <input type="checkbox"/> | YES | <input type="checkbox"/> NO |
| C. CARABINIERI ESCORT REQUIRED** | <input type="checkbox"/> | YES | <input type="checkbox"/> NO |

| |
|-------------|
| 16. REMARKS |
|-------------|

* When requesting nontactical vehicles, requesting unit may be required to provide the driver

** Requestor must coordinate with PMO for Carabinieri escort

| | |
|--|-----------|
| REQUESTOR'S NAME, GRADE, TITLE AND PHONE NUMBER (Print / Type) | SIGNATURE |
|--|-----------|

SECTION II – ACTION BY APPROVING AUTHORITY

| | | |
|-----|-------|-------|
| TO: | FROM: | DATE: |
|-----|-------|-------|

| |
|--|
| 1. <input type="checkbox"/> APPROVED <input type="checkbox"/> GOVT TRANS <input type="checkbox"/> COMMERCIAL <input type="checkbox"/> POV <input type="checkbox"/> OTHER |
| 2. <input type="checkbox"/> DISAPPROVED (State Reason) |

| | |
|---|-----------|
| NAME , GRADE, TITLE and TELEPHONE NUMBER (Print / Type) | SIGNATURE |
|---|-----------|

SAMPLE

| REQUEST FOR MISSION DISPATCH | | |
|--|---|-----------------------------------|
| (For use of this form see USASETAF Suppl 1 to USAREUR Reg 58-1) | | |
| SECTION I - REQUIREMENT | | |
| TO: | FROM: | DATE: [dd-MMM-yy] |
| TMP | RCO LIVORNO SUB-OFFICE | 27-July10 |
| 1. SERVICE TO BE PERFORMED | | |
| TRANSPORTATION PAX | | |
| 2. NUMBER OF PASSENGER | 3. TYPE OF CARGO | |
| 40 | | |
| 4. TYPE OF VEHICLE REQUIRED | 5. DATE VEHICLE REQUIRED | 6. TIME VEHICLE REQUIRED: [hh:mm] |
| 40 Pax Bus | 05 Aug 10 | 09:00 |
| 7. PLACE TO REPORT | 8. DESTINATION | 9. MILEAGE ONE WAY |
| Gate 4 | BLDG. 714 | |
| 10. DATE AND TIME OF RETURN | 11. OFFICIAL USER | 12. POC - PHONE NUMBER |
| 5-Aug-10 11:30 | Cristina Pancaccini | 633-8365 |
| 13. NAME OF DRIVER* | 14. ASSISTANT DRIVER REQUIRED PROVIDED BY | |
| Tmp Driver | | |
| 15. ADDITIONAL REQUIREMENT | | |
| A. MONEY FOR AUTOSTRADA TOLL REQUIRED <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO | | |
| B. POL COUPONS REQUIRED <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO | | |
| C. CARABINIERI ESCORT REQUIRED** <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO | | |
| 16. REMARKS | | |
| GENERAL REPAIR BLDG. 714, CAMP DARBY | | |
| * When requesting nontactical vehicles, requesting unit may be required to provide the driver | | |
| ** Requestor must coordinate with PMO for Carabinieri escort | | |
| REQUESTOR'S NAME, GRADE, TITLE AND PHONE NUMBER (Print / Type) | | SIGNATURE |
| Cristina Pancaccini U-1 Contracting Officer 633-8365 | | <i>Cristina Pancaccini</i> |
| SECTION II - ACTION BY APPROVING AUTHORITY | | |
| TO: | FROM: | DATE: |
| 1. <input type="checkbox"/> APPROVED <input type="checkbox"/> GOVT TRANS <input type="checkbox"/> COMMERCIAL <input type="checkbox"/> POV <input type="checkbox"/> OTHER | | |
| 2. <input type="checkbox"/> DISAPPROVED (State Reason) | | |
| NAME, GRADE, TITLE and TELEPHONE NUMBER (Print / Type) | | SIGNATURE |
| | | |

INSTRUCTIONS TO BE FOLLOWED IN CASE OF ACCIDENT

Regulations prescribe that any accident or incident involving military vehicles must be reported to the nearest US Military Police Station and/or the Military Police of the Headquarters to which the vehicle is assigned. All accidents/incidents, whether or not there is damage to the military vehicle, must be reported immediately. If circumstances do not allow it, the accident/incident will be reported within 24 hours. The TMP Supervisor/IFMS personnel are to be informed when this action has been completed

In the event of an accident involving a TMP vehicle, no matter how minor or whether or not any damage has occurred, the following action must be taken by the driver/senior occupant of the vehicle:

- Stop the vehicle.
- Render assistance to injured or call for help as applicable.
- Take precautions to prevent further accident or injuries by posting road guides and warning triangles.
- Report the accident to the nearest Military Police station by telephone. Ask local law enforcement for help if necessary. If this is not possible and the accident is minor, report to the MP Desk Sergeant immediately upon return to the installation.
- Obtain names and addresses of the persons involved with the accident. Make a sketch of the road where the accident occurred. A short description of the road conditions will also be made before leaving the scene. (Use the SF 91, Operator's Report of Motor Vehicle Accident located in the log book)
- Upon return to TMP, report the accident or incident to TMP/IFMS personnel who will provide you with additional information.
- Complete the Operator's Report of Motor Vehicle Accident, SF 91, as soon as possible, leaving no blank spaces on the form by using N/A, None, or Unknown when necessary.
- Damage, no matter how minor, must be reported to TMP no later than 24 hours after the accident/incident. This must be accomplished by the driver to whom the vehicle was dispatched or the individual who discovered the damage.

**MOTOR VEHICLE
ACCIDENT REPORT**

Please read the
Privacy Act State-
ment on Page 3.

INSTRUCTIONS: Sections I thru IX are filled out by the vehicle operator. Section X, Items 72 thru 82c are filled out by the operator's supervisor. Sections XI thru XII are filled out by an accident investigator for bodily injury, fatality, and/or damage exceeding \$500.

SECTION I - FEDERAL VEHICLE DATA

| | | | | | |
|--|---------------------------|---|---------|---------------------------|---|
| 1. DRIVER'S NAME (Last, first, middle) | | 2. DRIVER'S LICENSE NO./STATE/LIMITATIONS | | 3. DATE OF ACCIDENT | |
| 4a. DEPARTMENT/FEDERAL AGENCY PERMANENT OFFICE ADDRESS | | | | 4b. WORK TELEPHONE NUMBER | |
| 5. TAG OR IDENTIFICATION NUMBER | 6. EST. REPAIR COST \$ | 7. YEAR OF VEHICLE | 8. MAKE | 9. MODEL | 10. SEAT BELTS USED <input type="checkbox"/> YES <input type="checkbox"/> NO |
| 11. DESCRIBE VEHICLE DAMAGE | | | | | |

SECTION II - OTHER VEHICLE DATA (Use Section VII if additional space is needed.)

| | | | | | |
|---|---------------------|---|---------------------------------|--------------------------|--|
| 12. DRIVER'S NAME (Last, first, middle) | | 13. DRIVER'S LICENSE NUMBER/STATE/LIMITATIONS | | | |
| 14a. DRIVER'S WORK ADDRESS | | | 14b. WORK TELEPHONE NUMBER | | |
| 15a. DRIVER'S HOME ADDRESS | | | 15b. HOME TELEPHONE NUMBER | | |
| 16. DESCRIBE VEHICLE DAMAGE | | | 17. ESTIMATED REPAIR COST \$ | | |
| 18. YEAR OF VEHICLE | 19. MAKE OF VEHICLE | 20. MODEL OF VEHICLE | | 21. TAG NUMBER AND STATE | |
| 22a. DRIVER'S INSURANCE COMPANY NAME AND ADDRESS | | | | 22b. POLICY NUMBER | |
| | | | | 22c. TELEPHONE NUMBER | |
| 23. VEHICLE IS <input type="checkbox"/> CO-OWNED <input type="checkbox"/> RENTAL <input type="checkbox"/> LEASED <input type="checkbox"/> PRIVATELY OWNED | | 24a. OWNER'S NAME(S) (Last, first, middle) | | 24b. TELEPHONE NUMBER | |
| 25. OWNER'S ADDRESS(ES) | | | | | |

SECTION III - KILLED OR INJURED (Use Section VIII if additional space is needed.)

| | | | | | |
|--------------------------------|---|--|--|-------------------------|------------------------|
| 26. NAME (Last, first, middle) | | 27. SEX | 28. DATE OF BIRTH | | |
| 29. ADDRESS | | | | | |
| A | 30. MARK "X" IN TWO APPROPRIATE BOXES <input type="checkbox"/> KILLED <input type="checkbox"/> DRIVER <input type="checkbox"/> PASSENGER <input type="checkbox"/> INJURED <input type="checkbox"/> HELPER <input type="checkbox"/> PEDESTRIAN | | 31. IN WHICH VEHICLE <input type="checkbox"/> FED <input type="checkbox"/> OTHER (2) | 32. LOCATION IN VEHICLE | 33. FIRST AID GIVEN BY |
| | 34. TRANSPORTED BY | | 35. TRANSPORTED TO | | |
| 36. NAME (Last, first, middle) | | 37. SEX | 38. DATE OF BIRTH | | |
| 39. ADDRESS | | | | | |
| B | 40. MARK "X" IN TWO APPROPRIATE BOXES <input type="checkbox"/> KILLED <input type="checkbox"/> DRIVER <input type="checkbox"/> PASSENGER <input type="checkbox"/> INJURED <input type="checkbox"/> HELPER <input type="checkbox"/> PEDESTRIAN | | 41. IN WHICH VEHICLE <input type="checkbox"/> FED <input type="checkbox"/> OTHER (2) | 42. LOCATION IN VEHICLE | 43. FIRST AID GIVEN BY |
| | 44. TRANSPORTED BY | | 45. TRANSPORTED TO | | |
| a. NAME OF STREET OR HIGHWAY | | b. DIRECTION OF PEDESTRIAN (SW corner to NE corner, etc.) FROM _____ TO _____ | | | |
| 46. Pedes- trian | c. DESCRIBE WHAT PEDESTRIAN WAS DOING AT TIME OF ACCIDENT (Crossing intersection with signal, against signal, diagonally, in roadway playing, walking, hitchhiking, etc.) | | | | |

MOTOR VEHICLE ACCIDENT REPORT

Please read the Privacy Act Statement on Page 3.

INSTRUCTIONS: Sections I thru IX are filled out by the vehicle operator. Section X, Items 72 thru 82c are filled out by the operator's supervisor. Sections XI thru XIII are filled out by an accident investigator for bodily injury, fatality, and/or damage exceeding \$500.

SECTION I - FEDERAL VEHICLE DATA

| | | | | | |
|--|---------------------|---|-----------------|---------------------------|---|
| 1. DRIVER'S NAME (Last, first, middle) | | 2. DRIVER'S LICENSE NO./STATE/LIMITATIONS | | 3. DATE OF ACCIDENT | |
| [REDACTED] | | [REDACTED] | | 7 Jan 98 | |
| 4a. DEPARTMENT/FEDERAL AGENCY PERMANENT OFFICE ADDRESS | | | | 4b. WORK TELEPHONE NUMBER | |
| US Army/131 Transportation Company, FT Eustis, VA 23604-5000 | | | | (757) 878-0001 | |
| 5. TAG OR IDENTIFICATION NUMBER | 6. EST. REPAIR COST | 7. YEAR OF VEHICLE | 8. MAKE | 9. MODEL | 10. SEAT BELTS USED |
| AJ30 ABC (Trk-15) | \$2,000 | 1996 | Trk, Cgo, 5-Ton | M1083 | <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO |
| 11. DESCRIBE VEHICLE DAMAGE | | | | | |
| Right headlight & signal light broke, front bumper bent & torn, right front cab crushed, right front tire cut. | | | | | |

SECTION II - OTHER VEHICLE DATA (Use Section VIII if additional space is needed.)

| | | | |
|---|---------------------|---|--|
| 12. DRIVER'S NAME (Last, first, middle) | | 13. DRIVER'S LICENSE NUMBER/STATE/LIMITATIONS | |
| [REDACTED] | | 111-11-1110/VA/Daylight only | |
| 14a. DRIVER'S WORK ADDRESS | | 14b. WORK TELEPHONE NUMBER | |
| NA (retired) | | () NA | |
| 15a. DRIVER'S HOME ADDRESS | | 15b. HOME TELEPHONE NUMBER | |
| 100 Panther Paw Patch, Gloucester, VA 23061-1114 | | (804) 693-0000 | |
| 16. DESCRIBE VEHICLE DAMAGE | | 17. ESTIMATED REPAIR COST | |
| Tailgate, bed, rear bumper & taillights smashed. | | \$4,000 | |
| 18. YEAR OF VEHICLE | 19. MAKE OF VEHICLE | 20. MODEL OF VEHICLE | |
| 1989 | Nissan | Pickup | |
| 22a. DRIVER'S INSURANCE COMPANY NAME AND ADDRESS | | 22b. POLICY NUMBER | |
| Tidewater Pilecap Mutual Insurance | | 000-00-123 | |
| 123 Hightide Road, Norfolk, VA 24671-1561 | | 22c. TELEPHONE NUMBER | |
| | | (757) 321-0000 | |
| 23. VEHICLE IS | | 24a. OWNER'S NAME(S) (Last, first, middle) | |
| <input type="checkbox"/> CO-OWNED <input type="checkbox"/> LEASED <input checked="" type="checkbox"/> RENTAL <input checked="" type="checkbox"/> PRIVATELY OWNED | | Same as item 12. | |
| 25. OWNER'S ADDRESS(ES) | | 24b. TELEPHONE NUMBER | |
| Same as item 15a. | | () Same as item 15b. | |

SECTION III - KILLED OR INJURED (Use Section VIII if additional space is needed.)

| | | | | |
|--|--|--|-------------------------|---------------------------------|
| 26. NAME (Last, first, middle) | | | 27. SEX | 28. DATE OF BIRTH |
| [REDACTED] | | | M | 17 Jan 27 |
| 29. ADDRESS | | | | |
| Same as item 15a. | | | | |
| 30. MARK "X" IN TWO APPROPRIATE BOXES | | 31. IN WHICH VEHICLE | 32. LOCATION IN VEHICLE | 33. FIRST AID GIVEN BY |
| <input type="checkbox"/> KILLED <input checked="" type="checkbox"/> INJURED <input checked="" type="checkbox"/> DRIVER <input type="checkbox"/> HELPER <input type="checkbox"/> PASSENGER <input type="checkbox"/> PEDESTRIAN | | <input checked="" type="checkbox"/> FED <input checked="" type="checkbox"/> OTHER (2) | Behind Steering Wheel | Mobydick Volunteer Rescue Squad |
| 34. TRANSPORTED BY | | 35. TRANSPORTED TO | | |
| Mobydick Volunteer Rescue Squad | | McDonald Army Community Hospital, FTEustis, VA 23604-5001 | | |
| 36. NAME (Last, first, middle) | | | 37. SEX | 38. DATE OF BIRTH |
| None | | | | |
| 39. ADDRESS | | | | |
| | | | | |
| 40. MARK "X" IN TWO APPROPRIATE BOXES | | 41. IN WHICH VEHICLE | 42. LOCATION IN VEHICLE | 43. FIRST AID GIVEN BY |
| <input type="checkbox"/> KILLED <input type="checkbox"/> INJURED <input type="checkbox"/> DRIVER <input type="checkbox"/> HELPER <input type="checkbox"/> PASSENGER <input type="checkbox"/> PEDESTRIAN | | <input type="checkbox"/> FED <input type="checkbox"/> OTHER (2) | | |
| 44. TRANSPORTED BY | | 45. TRANSPORTED TO | | |
| | | | | |

| | | |
|----------------|---|--|
| 46. Pedestrian | a. NAME OF STREET OR HIGHWAY | b. DIRECTION OF PEDESTRIAN (W corner to NE corner, etc.) |
| | None | FROM TO |
| | c. DESCRIBE WHAT PEDESTRIAN WAS DOING AT TIME OF ACCIDENT (Crossing the road, against signal, diagonally, in roadway playing, walking, hitchhiking, etc.) | |

SAMPLE

DRIVERS RESPONSABILITIES

Responsibilities as an Operator of a GSA Fleet Vehicle
Do's and Don'ts

The operator of a GSA Fleet vehicle is responsible for its proper use, maintenance, and protection. Abiding by the following Do's and Don'ts will help GSA keep costs down and provide the necessary services.

DO DRIVE DEFENSIVELY AND SAFELY. The most important safety factor in an automobile is the driver.

Fasten Safety Belts. It's the law! Required by FMPR 101-39.300(c) and Executive Order 13043.

Adjust head restraints so that the head is centered on the restraint.

Use both the rearview and side-view mirrors and the turn signal before moving from one traffic lane to another.

Use the emergency flasher lights when the vehicle becomes disabled or when stopping for an emergency on the side of the highway or any other public road.

Obey all traffic laws. A traffic or parking violation is the personal responsibility of the operator.

DO SAFEGUARD THE VEHICLE, CREDIT CARD(S), AND KEYS AGAINST DAMAGE, THEFT, OR MISUSE. Caution: the agency is financially responsible for losses due to vehicle theft, pilferage, vandalism, parking lot damages, and damages beyond normal wear and tear.

Lock all doors and carry the keys and credit cards) when leaving the vehicle unattended.

Turn in keys and a credit card when returning the vehicle to the FMC.

Store the vehicle in a secure parking facility when possible.

Report lost, damaged, or stolen credit cards and/or license plates immediately to the FMC.

Report the theft of the vehicle or its contents immediately to:

- The local law enforcement agency
- The FMC manager or the MCC technician
- A supervisor

Set the parking brake when leaving the vehicle.

Carry a valid operator's permit for the type of vehicle operated, including a commercial driver's license for vehicles if required.

DON'TS:

DO NOT SMOKE. Smoking is prohibited in GSA Fleet vehicles.

DO NOT Use the vehicle for private business, personal errands, or recreation. Avoid creating any perception of misuse. Reported incidents of misuse often result in disciplinary actions.

DO NOT Transport family members, personal friends, or non-Government employees in the vehicle without specific permission from the head of the agency or his or her designee.

DO NOT Use the vehicle for transportation to or from work or park it at un-authorized residences' without valid written authorization, as required by FPMR 101.38-3.

DO NOT Drive the vehicle without fastening the safety belt and ensuring all passengers have fastened theirs.

DO NOT Use a cellular telephone when at a gas station. Cellular phone use at gas stations or anywhere fuel is stored is hazardous. The switches and high-powered batteries in the phone can generate sparks that can set-off explosions. In one incident, a driver suffered burns and the car was severely damaged when gasoline fumes ignited an explosion while talking on a mobile phone near a gas pump. All electronic devices in gas stations are protected with explosive containment devices, while cell phones are not.

Carry a valid operator's permit for the type of vehicle operated, including a commercial driver's license for vehicles if required.

DON'TS:

DO NOT SMOKE. Smoking is prohibited in GSA Fleet vehicles.

DO NOT Use the vehicle for private business, personal errands, or recreation. Avoid creating any perception of misuse. Reported incidents of misuse often result in disciplinary actions.

DO NOT Transport family members, personal friends, or non-Government employees in the vehicle without specific permission from the head of the agency or his or her designee.

DO NOT Use the vehicle for transportation to or from work or park it at un-authorized residences' without valid written authorization, as required by FPMR 101.38-3.

DO NOT Drive the vehicle without fastening the safety belt and ensuring all passengers have fastened theirs.

DO NOT Use a cellular telephone when at a gas station. Cellular phone use at gas stations or anywhere fuel is stored is hazardous. The switches and high-powered batteries in the phone can generate sparks that can set-off explosions. In one incident, a driver suffered burns and the car was severely damaged when gasoline fumes ignited an explosion while talking on a mobile phone near a gas pump. All electronic devices in gas stations are protected with explosive containment devices, while cell phones are not.

BORDER CROSSING

Personnel/Units wishing to use TMP/IFMS vehicles to traverse Austria and Switzerland or any other Non NATO country, must first obtain Border Clearance (Authority to Transit) from the U.S Embassy for the country they are traversing.

In addition to Border Clearance, Austria requires that the vehicle be covered by insurance and the vehicle has a green EU insurance card in the vehicle. In addition, Austria requires the purchase of road sticker prior to the vehicle entering the country.

To obtain Border Clearance, units must submit requests to the Dispatching Office
The following information must be provided

Make and Model of vehicle

Cover Tag number and Admin Number

Date of departure and date of return.

Destination

Units/Sections requesting the use of TMP vehicles outside of Italy, must notify the DOL IFMS Fleet Manager a minimum of 5 working days prior to scheduled departure date in order to obtain border clearance and activation of Insurance.

NOTE: Austria does not recognize a SETAF or OF 346 Drivers License. Austria and Switzerland law requires a valid license issued by an EU country or a valid US drivers license accompanied by an International Drivers License.

INTERNATIONAL DRIVER PERMIT

DoD employees assigned to Camp Darby and their dependents are eligible for a SETAF license which, in conjunction with your U.S. license, entitles you to drive in Italy. For information on getting a SETAF license, please contact the DOL Driver Testing office at DSN 633-8161. **The SETAF license is valid ONLY in NATO countries (this does not include Switzerland or Austria). Also, the rules can vary based on official or unofficial travel and whether you are civilian or military.** Although some countries will accept your SETAF license or even a U.S. license, you are strongly encouraged to get an international driving permit (IDPs). IDPs are honored in more than 150 countries outside the U.S. For more information on applying for an international license, contact the DOL Driver Testing office at DSN 633-8161. Additional information can be found on the [Travel State \(US Department of State\) home page](#).



International Driving Permits

Although many countries do not recognize U.S. driver's licenses, most countries accept an international driving permit (IDPs). IDPs are honored in more than 150 countries outside the U.S. (See AAA's application form for the list of countries. They function as an official translation of a U.S. driver's license into 10 foreign languages. Article 24 of the United Nations Convention on Road Traffic (1949) authorizes the U.S. Department of State to empower certain organizations to issue IDPs to those who hold valid U.S. driver's licenses. These licenses are not intended to replace valid U.S. state licenses and should only be used as a supplement to a valid license. IDPs are not valid in an individual's country of residence.

How to apply for an IDP

If you prefer to secure your International Driving Permit through the mail, enclose your completed application form, two ORIGINAL passport-type photos each signed on the back, a \$15USD* permit fee and a photocopy of both sides of your driver's license and mail them to the AAA office nearest you. Include additional U.S. funds for expedited return mail service, if desired. (See USPS.com or DHL.com for rates.)

NOTE: If you are currently overseas you can mail your completed application to the following office and address:

AAA/IDP
1000 AAA Drive
Heathrow, FL 32746
Attn: Mailstop #28

*Funds must be in U.S. dollars. Acceptable forms of payment are U.S. bank check or money order payable to AAA and these major credit cards with expiration date- Visa, MasterCard, American Express, Discover Card.

**Digital photographs are acceptable, however, they must be of a certain quality. Please read http://travel.state.gov/passport/pptphotos/digital_photography.html for guidelines.

WARNING-- International Driving Permits Issued by unauthorized persons: The Department of State is aware that IDPs are being sold over the Internet and in person by persons not authorized by the Department of State pursuant to the requirements of the U.N. Convention of 1949. Moreover, many of these IDPs are being sold for large sums of money, far greater than the sum charged by entities authorized by the Department of State. Consumers experiencing problems should report problems to their local office of the U.S. Postal Inspector, Federal Trade Commission (FTC), the Better Business Bureau, or their state or local Attorney General's Office.

Source

<http://www.aaa.com/PPInternational/International.html>

How to obtain an A.F.I Motorcycle Endorsement

1. You must first be have a stateside or country motorcycle endorsement. You will need to present your endorsement. **Learner's permits are not authorized.**
2. You must be adhere to the following age requirements:
Endorsement Category, Displacement, Age requirement
A1 - Up to 50 cc 18 and older
A2 - Up to 250 cc 18 and older
A3 - 350 and above 21 and older
3. You must register with IMCOM Europe.
Click here: http://www.imcom-europe.army.mil/sites/management/so_atstp.asp
4. For scheduled course dates and to start the registration process, click on "Click Here to Register" (red font).
5. You will be redirected to <https://airs.lmi.org/home.aspx>
6. Click on "View Available Courses" (blue font).
7. Use the drop box features and enter the following information:
 - a. Region: Europe
 - b. Garrison: Livorno
 - c. Courses: Motorcycle Basic Rider Course (for novice & re-entry riders) or Motorcycle Experienced Rider Course.
8. A calendar will appear, click on the available training date and follow the on-screen instructions to complete the registration process.
9. Once your registration is submitted and you have received a confirmation email, then you are locked in the course.
10. If you do not have a current A.F.I endorsement, then you must complete the following:
 - a. Report to the Driver's Testing Station 24 hours prior to the scheduled training date. Be sure to have your stateside or country endorsement and the A.F.I Driver's License ready for inspection.
 - b. You will receive a 48 hour temporary endorsement for the sole purpose of transporting your motorcycle to the meeting area.
11. If you do not have a motorcycle license plate, then you must complete the following:
 - a. Have your motorcycle ready to pass the TCLOCS inspection (information on website).
 - b. Have your motorcycle insurance documents ready for inspection.
 - c. Ensure your motorcycle is registered.
 - d. When you have your temporary endorsement, take your documents to the Vehicle Registration Office and you will then be issued a license plate.
12. On the day of training, we will all meet at the Driver's Testing Station, Bldg #703.



DEPARTMENT OF THE ARMY
U.S. ARMY GARRISON LIVORNO
UNIT 31301
CAMP DARBY, 56018 TIRRENIA (PISA)

IMEU-LIV-LGT

DATE:

MEMORANDUM FOR _____

Subject: Temporary Authorization to Ride Motorcycle

1. This memorandum authorizes _____ to operate his/her privately owned motorcycle between his/her place of residence at _____ and the Camp Darby Motorcycle Safety Foundation training Course, bldg 702 (Transportation Motor Pool) from _____ to _____. Operating a motorcycle to or from any other location is not authorized and could result in revocation of SETAF driver license IAW revocation and suspension regulations and policies.
2. This memorandum is only valid when the individual named above possesses a valid POV SETAF license (without motorcycle endorsement). The individual must still meet all insurance and registration requirements for the motorcycle he/she will operate.
3. This memorandum only indicates that the individual has completed the written classroom portion of the Motorcycle Safety Foundation (MSF) training and is authorized to operate his/her motorcycle to/from and during the remaining portion of the MSF course for which he/she is currently enrolled. This temporary authorization is IAW SETAF Regulation 190-2 dtd January 2007.
4. If the above named individual is uncomfortable at anytime riding his/her POV motorcycle he/she should find a legally licensed motorcycle rider to bring the motorcycle to the training course for him/her.
5. Only valid when signed and stamped below by the USAG-Livorno TMP licensing officer.

USAG-Livorno Transportation Officer



Goggles and Face Shield.
Impact or shatter resistant goggles or full-faced shield protection attached to helmet. A windshield or eyeglasses alone are not sufficient.

Helmets.
Certified to meet Department of Transportation (DOT) standards and properly fastened under the chin.

Reflective Safety Vest.
Upper body lime green or international orange reflective safety vest with reflective strips stitched, ironed or otherwise affixed to the vest on both the front and back sides.

Clothing
Long sleeved shirt or jacket, long trousers, and full-fingered gloves or mittens designed for use on a Motorcycle.

Footwear.
Sturdy footwear, Leather boots or over-the-ankle shoes. Tennis shoes, sneakers, or sandals are not sufficient.

Motorcycle, PPE

Transportation Motor Pool , Telephone Numbers

| | |
|-------------------------|----------|
| TMP, Main Office | 633-8160 |
| TMP, Dispatcher Office | 633-8162 |
| Driving Testing Section | 633-8161 |
| Fax | 633-8168 |

Important Telephone Numbers

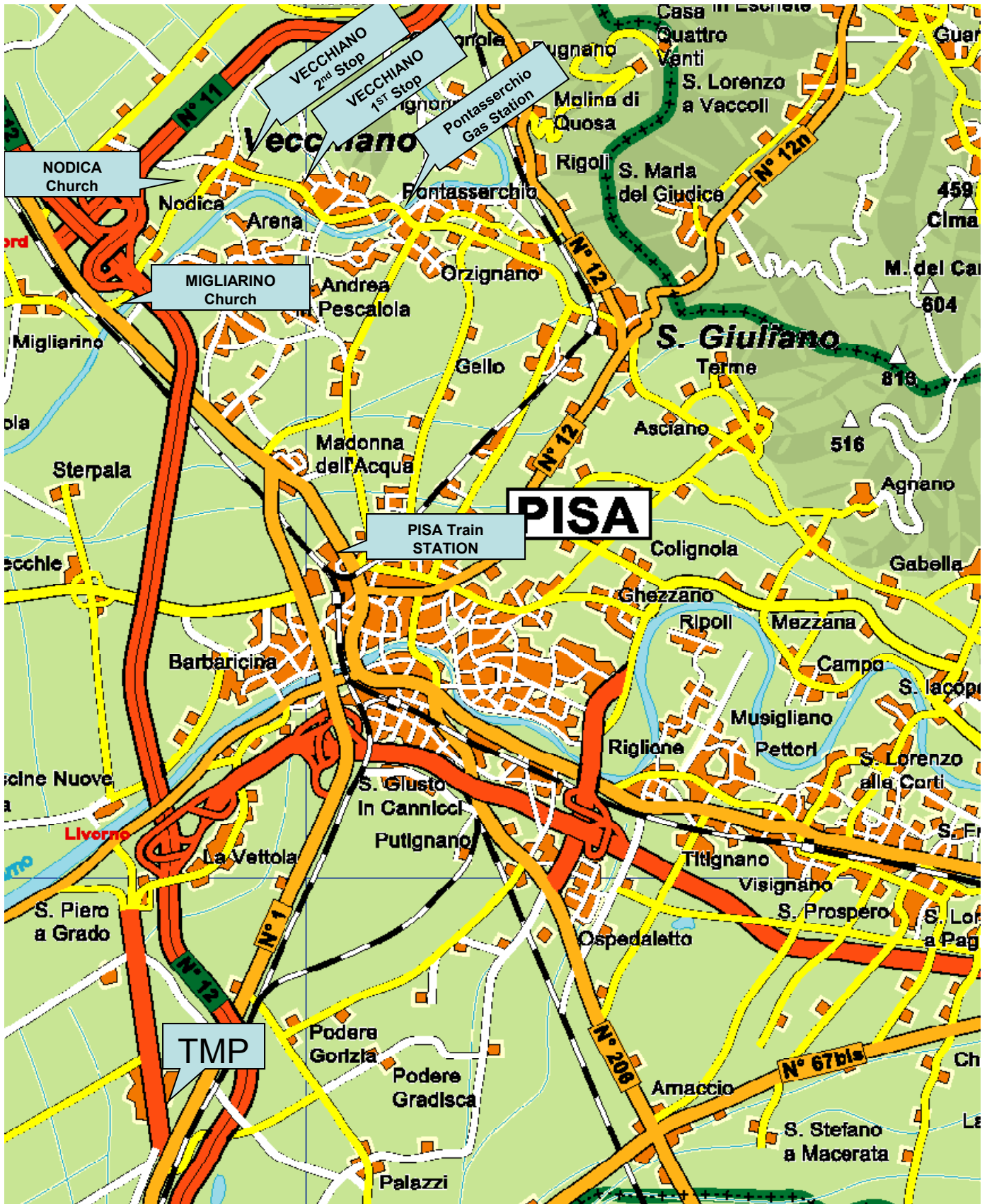
| | |
|------------------------------|--------------|
| Emergency | 911 |
| MP DESK | 050-54 7575 |
| Darby Operator | 050-54 7111 |
| Vicenza Operator | 0444-71 113 |
| Aviano Operator | 0434-30 1110 |
| American Red Cross (Vicenza) | 0444-71 7089 |

Emergency Numbers Livorno/Pisa Area

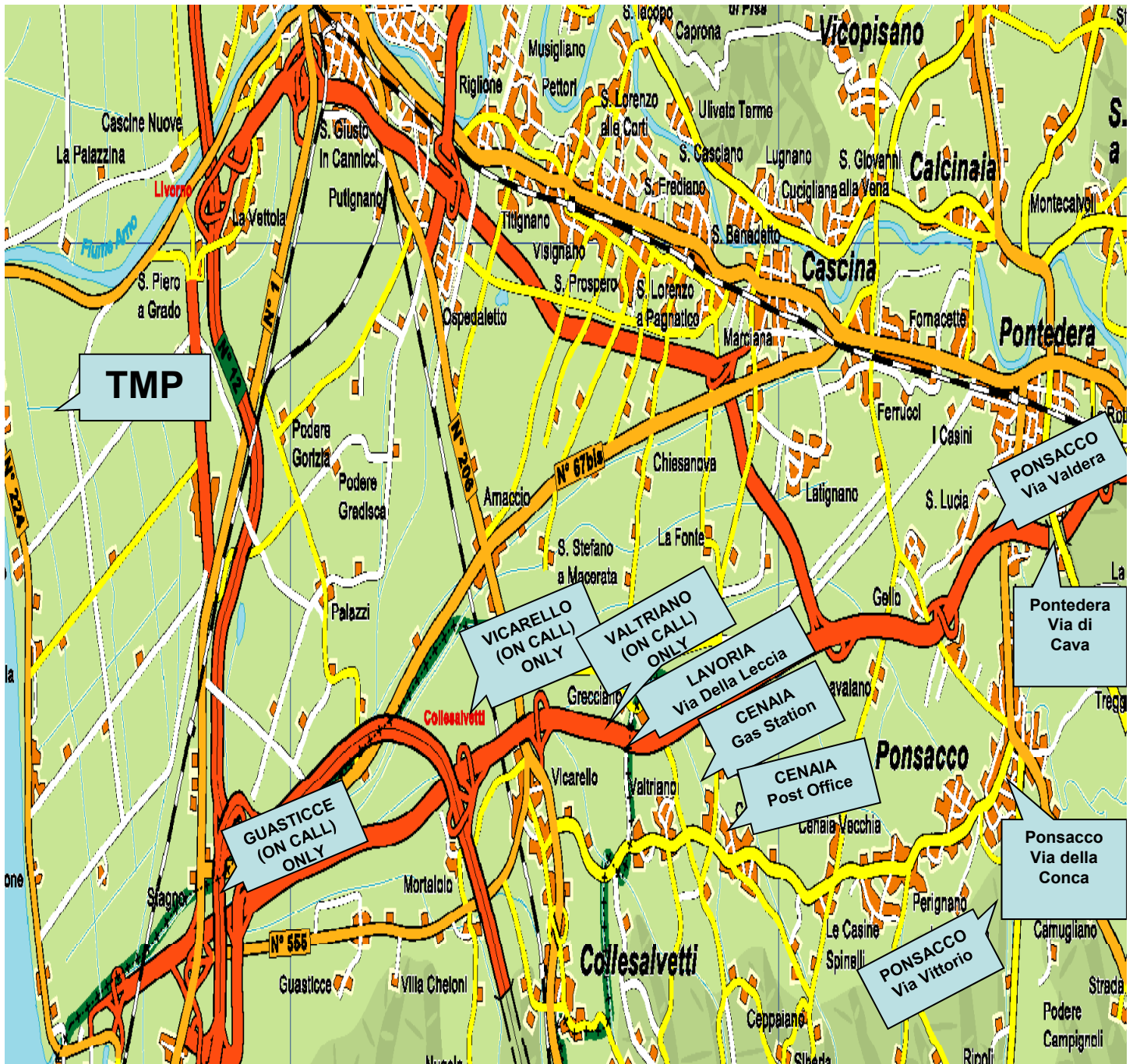
| | |
|-------------------|-------------|
| Carabinieri | 112 |
| Fire | 115 |
| Emergency | 113 |
| Ambulance | 118 |
| Hospital, Livorno | 0586-223111 |
| Hospital, Pisa | 050-92111 |



LIVORNO AREA



PISA AREA



CENAIA/ PONSACCO AREA



Camp Darby 😊