

For: State and County Offices

Using Government Owned/Leased Vehicles (GOV's) for Home-to-Work (HTW) Travel

Approved by: Deputy Administrator, Management



1 Clarification of DR 5400-005

A Background

Employees may be authorized to use GOV's for transportation to and from work only when that use is consistent with DR 5400-005 and approved by the Secretary of Agriculture in advance. GOV's for HTW transportation are **only** authorized for employees on normal duty (nontravel) status performing assigned duties at or near their ODS.

B Purpose

This notice provides clarification of DR 5400-005 as applied to FSA field work.

C HTW Transportation Approval Process

All requests for HTW authorization are to be submitted on AD-728 (Exhibit 1), as follows:

- blocks 1 through 10 **must** be completed by the requestor and signed in block 11
- block 12 **must** be signed by SED as the recommending official
- the original shall be sent to MSD Fleet Manager, Steve Jones, for review and forwarding to OPPM.

OPPM will submit all AD-728's to the Secretary of Agriculture for final approval.

Disposal Date	Distribution
June 1, 2012 12-1-11	State Offices; State Offices relay to County Offices

1 Clarification of DR 5400-005 (Continued)

D Completing Cost Analysis

When completed the cost analysis, provide the following:

- completed FSA-508 (Exhibit 2)
 - a memorandum that includes the following:
 - a cost/benefit analysis that considers and describes the costs and benefits of HTW versus POV's to show the cost savings and mileage saved to benefit the Government
- Note:** Requester should show the cost breakout of GOV compared to the reimbursable cost of using requester's POV.
- a description of the tasks that GOV is expected to perform, including a description of any required equipment or GOV modifications, and why other forms of transportation are not suitable to accomplish those tasks
 - a justification that assesses the relative importance to FSA's mission of authorizing using HTW versus other forms of transportation
 - an explanation as to why it is critical to FSA's mission that performance of duties begins at the employee's residence rather than the employee's ODS.

Note: Examining FSA-508's to determine whether response from home has never been required.

E Current Actions Taken

DD's and COR's are **not** exempt from DR 5400-005, even when they are on official travel status for temporary duty assignments.

Positions designated in DR 5400-005 Appendix A to perform field work are authorized to use GOV's for official purposes to and from an employee's resident **after** approval by the Secretary of Agriculture.

Note: Approval is done on a case-by-case basis.

Justification for including DD's and COR's in DR 5400-005 Appendix A has been submitted to OPPM. AD-728 must still be submitted for each DD or COR requesting HTW use of GOV.

2 Additional Information

A Previously Submitted FSA-728's

States do not have to resubmit previously submitted FSA-728's. MSD is currently reviewing all requests.

B Contact Information

State Offices that require additional information shall contact either of the following:

- Paige Haggins by either of the following:
 - e-mail to **paige.haggins@wdc.usda.gov**
 - telephone at 202-720-2827

- Steve Jones by either of the following:
 - e-mail to **steve.jones@wdc.usda.gov**
 - telephone at 202-720-8729.

Example of AD-728, "Request and Authorization for Home to Work Transportation"

The following is an example of AD-728.

Form AD-728 (Rev. 12/88)			
REQUEST AND AUTHORIZATION FOR HOME TO WORK TRANSPORTATION	1. AGENCY		
	2. ORGANIZATIONAL UNIT		
3. NAME OF EMPLOYEE	4. OCCUPATION OR TITLE		
5. RESIDENT ADDRESS	6. OFFICIAL STATION		
7. DISTANCES TRAVELED FROM:			
a. Residence to Office. _____ b. Residence to nearest Government or Commercial storage facility offering service during required hours. _____ c. Daily tour of duty - Give each location starting with first departure (<i>Home or office, plant, establishment, etc.</i>) and mileage between each point. i.e. Home to office-3 miles, Office to field station - 10 miles, Field station to area office - 4 miles. _____			
8. REASON FOR HOME TO WORK TRANSPORTATION			
<input type="checkbox"/> a. An intermediate or imminent clear and present danger presents a threat to the physical safety of the employee's person or property. (<i>Describe.</i>) <input type="checkbox"/> b. An emergency has created an immediate, unforeseeable temporary need to provide home-to-work transportation in order to guarantee uninterrupted performance of the agency's mission. (<i>Describe the nature of the emergency and the role of the employees to the agency's mission.</i>) <input type="checkbox"/> c. Compelling operational considerations make the provision of home-to-work transportation essential to the conduct of official business or would substantially increase the agency's efficiency or economy. (<i>Describe the circumstances and/or explain how other available alternatives would involve substantial additional costs to the Government or expenditures of employee time.</i>) <input type="checkbox"/> (1) Stationed at a field point with no office and normally proceed directly from residence to varying points of duty. <input type="checkbox"/> (2) Stationed at a field point with local office, but normally proceed directly from residence to varying points of duty. <input type="checkbox"/> (3) Frequently required to depart on, and return from, fields trip at unusually early or late hours, during which the use of public transportation or services of other storage facilities are not available or reasonable. <input type="checkbox"/> (4) Engaged in law enforcement duties under 31 U.S.C. 1344. <input type="checkbox"/> (5) Storage of vehicle at residence due to economical or security reasons. <input type="checkbox"/> d. Field Work <input type="checkbox"/> e. Residence is permanent Official Duty Station.			
DESCRIPTION:			
9. AUTHORIZATION PERIOD			
FROM:	TO:		
10. VEHICLE IDENTIFICATION			
<input type="checkbox"/> Owned	Type of vehicle (<i>Describe: i.e., sedan, truck, etc.</i>)		
<input type="checkbox"/> Leased			
11. CERTIFICATION (See Privacy Act Statement)			
I CERTIFY that the above information is true and correct to the best of my knowledge. I will not use this vehicle at any time for my personal convenience or permit others to do so. When parked at or near residence, vehicle will be kept locked and every precaution taken to guard it against damage or theft, etc. I understand that use of this vehicle for other than official purposes makes me subject to suspension without pay for a period of not less than one month or to removal summarily from office as provided in 31 U.S.C. 1349(b).			
SIGNATURE OF EMPLOYEE	DATE SIGNED		
12. RECOMMENDATION			
APPROVED	SIGNATURE	TITLE	DATE
<input type="checkbox"/> YES <input type="checkbox"/> NO			
13. AUTHORIZATION			
APPROVED	EXPLAIN DISAPPROVAL		
<input type="checkbox"/> YES <input type="checkbox"/> NO			
SIGNATURE	TITLE	DATE	
This authorization is not transferable. A new application must be submitted whenever the circumstances, as stated above, change to such as extent as to make continued authority questionable. The approving officer should be notified immediately when for any reason (<i>such as transfer, separation, etc.</i>) this authority is no longer required.			

