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**ER-6 Distracted Driving Policy**

**Please read the Distracted Driving Policy, sign and return to your supervisor.**

In order to increase employee safety and eliminate unnecessary risks behind the wheel, Fairfield County has enacted a Distracted Driving Policy, effective April 1, 2014. We are committed to ending the epidemic of distracted driving, and have created the following rules, which apply to any employee operating a county vehicle or using a county-issued cell phone:

- Fairfield County employees may not use a hand-held cell phone while operating a county vehicle – whether the vehicle is in motion or stopped at a traffic light. This includes, but is not limited to, answering or making phone calls, engaging in phone conversations, and reading or responding to emails, instant messages, and text messages.
- The use of county cell phones or any county electronic communication equipment shall not be used to conduct personal, outside, or moonlighting business of the employee while on county time.
- If Fairfield County employees need to use their phones, they must pull over safely to the side of the road or another safe location. If you have a passenger, it is acceptable to let the passenger make or receive the phone call.
- Violation of this policy will result in disciplinary action up to and including termination.

**Important Notice:** Fairfield County reserves the right to examine the usage of county owned electronic devices of individual employees in detail if there is suspicion of unauthorized cell phone usage. Even though an item has been deleted and the employee cannot retrieve it, this does not mean that the county cannot do so. It is also possible to generate a report of every call made by each user and how much time was spent on each call. Fairfield County reserves the right to exercise this capacity without notice or reason.

I acknowledge that I have received a written copy of the Distracted Driving Policy, and I fully understand the terms of this policy, that I agree to abide by these terms, and that I am willing to accept the consequences of failing to comply with this policy.

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**Employee Signature**

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**Date**

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**Employee Name (print)**