

LAW OFFICES OF THE PUBLIC DEFENDER

Chief Public Defender Bennett J. Baur

NEW MEXICO

Defensive Driving Notification

A Defensive Driving Course (DDC) is required before an LOPD employee can drive any of the LOPD state vehicles. The LOPD has a direct payment set up with General Services Division (GSD) to bill for LOPD employees who attend: a purchase order is no longer used. Prior approval must be obtained from your supervisor before attending the DDC.

LOPD employees have two (2) options to complete the DDC:

- The online course consists of two (2) parts and is only available to "new" state employees and for those LOPD employees who's DDC Certificate has expired. The link to register is:
 http://www.generalservices.state.nm.us/transportationservices/onlinedefensivedriving.aspx
- The classroom training is a six (6) hour class, and anyone can attend. The link to register is:
 <u>http://www.generalservices.state.nm.us/transportationservices/Defensive_Driving_Training.</u>
 <u>aspx</u>
 - > Select the class date and location you want to attend and register.

Please submit a copy of your DDC Certificate to HR for your personnel file after having attended the class. Fax # (505)204-7060 or email: lopd-hr@lopdnm.us.

State Vehicle Fraud, Waste, and Abuse

Transportation Services Division/GSD will notify the Chief Public Defender if one of our State Vehicles has been reported as possibly violating the state's vehicle use policies.

If your LOPD district state vehicle is identified in a possible abuse situation, a letter is forwarded to your District Defender asking for an explanation for the supposed abuse of the state vehicle. Work with your District Defender as the response to this letter must be received by GSD within seven (7) days.

State Vehicle – Report a Vehicle Accident or Vandalism

The LOPD must report any state vehicle accident or vandalism immediately to Judy Gonzales at judy.gonzales@lopdnm.us.

Information that needs to be provided is:

- Date of loss, location of accident or incident, and description of accident or incident
- Year, make and model of vehicle
- License plate number, driver name, driver's license number, current DDC certificate, phone number.

Employee Name: _____

Employee Signature:

Date: _____