



Fleet Safety

This sample program was developed to assist Republic Indemnity policyholders provide workplace protection for their employees and to reduce losses resulting from accidents and injuries. Remember, this is only a guide. Your business is unique and therefore you must chart your own course to ensure compliance with applicable laws and regulations. The material in this publication is based on principles and techniques developed by occupational safety and health professionals. It should not be considered exhaustive of all measures and controls that can be implemented by management to address all potential loss or injury producing causes. It is intended to provide guidance, rather than prescribe requirements and is not intended as a legal interpretation of any state standard, every county or city therein. This sample program must be maintained current in order to be effective and may need additional elements to address specific hazards in your work environment. The effectiveness of any loss prevention program should be periodically reassessed against actual loss experience and updated as needed to address new or developing hazards in your work environment.

We strongly encourage your company to customize this sample program by reviewing each section and making appropriate entries or modifications to the program to address your particular business operations and hazard exposures. Most sections of this document can be modified as necessary. Prompts have been included throughout the document where it is advisable to enter your company name and the name(s) of designated responsible personnel. Some forms have protected content and cannot be modified. Forms are designed to be printed for later use.

We hope that you will find this safety program material useful in helping to maintain a safe worker environment.

Fleet Safety Program

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Fleet Loss Control Program

This program applies to fleets with commercial driver licenses. An additional reference is the Federal Motor Carrier Safety Regulations.

Safety Policy

Fleet accident control is an essential element of good business practice and an integral part of our overall corporate safety policy. To that end, the management of Company name: _____ considers it necessary to establish and maintain operating rules and procedures that require drivers to be responsible for the safe operation and maintenance of their vehicles. Driver safety performance will be monitored and evaluated by management on an ongoing basis.

Responsibility

Our company believes it is the responsibility of every employee to maintain the safest conditions and equipment at all times. Each employee will be expected to demonstrate an attitude that reflects this policy and promotes safe work habits. Fleet safety shall take precedence over expediency or short cuts at all times. Our company intends to comply with all applicable safety laws and regulations.

Objective

The efficiency of any operation can be measured directly by its ability to control losses. Accidents resulting in personal injury and damage to property and equipment represent needless suffering and waste. Our company is committed to the goal of reducing and eliminating personal injury and damage to property and equipment caused by the operation of our commercial motor vehicles.

Driver Qualification Overview

- A. Hiring Criteria** - Our company has a written plan providing hiring criteria. It addresses acceptable driving experience, motor vehicle records, and the physical condition of the respective driver.
- B. Hiring Decision** - Termination, no hire and probation will be considered for drivers and potential drivers based on the offense, circumstances, and previous corrective action history of the employee.
- C. Employment Application** - All new drivers will be required to complete an application that provides employment history, driving experience, necessary personal information, and medical history.
- D. Reference Checks** - Documented reference checks must be made with previous employers to verify past driving experience.
- E. Motor Vehicle Records** - Motor vehicle records shall be ordered on all newly employed drivers at their hiring. MVR's shall be followed up on at least annually. Uniform criteria shall be established to determine the acceptability of driving records.
- F. Road Tests** - Drivers shall be tested in a vehicle of the type they'll be required to operate in order to determine familiarity with equipment, ability to operate it under the various conditions that will be encountered, driving attitude, and awareness of motor laws.
- G. Probationary Period** - Drivers shall be advised that they are on a probationary status until motor vehicle records and reference checks are determined acceptable, and until their driving abilities and attitudes are considered adequate.

Driver Qualifications

A. Hiring Criteria - The following are general criteria that must be met to be considered for a driving position within fleet operations:

- 1) Be at least 21 years of age.
- 2) Be able to read and speak the English language sufficiently to converse with our clients and the general public, to understand highway traffic signs and signals, to respond to official inquiries, and make entries on reports and records.
- 3) Have experience and/or training sufficient to operate the vehicle safely.
- 4) Be able to determine that the cargo has been properly loaded, located, distributed, and secured in or on the vehicle.
- 5) Be physically qualified to operate the vehicle, according to **Federal Motor Carrier Safety Regulations (FMCSR)**.
- 6) Have a single valid operator's license.
- 7) Have provided the corporation with a record of traffic violations for the previous 12 months.
- 8) Have successfully completed a road test and has a certificate of completion.
- 9) Has taken the required written examination and be issued a certificate of completion.
- 10) Driver is not disqualified under the rules in Part 391.15 of FMCSR. Driver's license has not been revoked, suspended, withdrawn, or denied an operator's license.
- 11) Driver has not been convicted for operating under the influence of alcohol or illegal drugs while on duty; leaving the scene of an accident while operating a commercial motor vehicle, or commits a felony involving the use of a motor vehicle.

B. Hiring Decision - The following are examples of the types of actions considered subject to corrective action, depending on the offense, circumstances and previous corrective action history of the employee. This list is not exhaustive.

1) **Termination or No Hire:**

- a. Capital violations such as homicides or assault with a motor vehicle or theft of a motor vehicle.
- b. Two or more incidents of driving while intoxicated, reckless driving, hit and run, illegal drug use, or negligent homicide within a three-year period.
- c. Three or more accidents occurring within a three-year period.
- d. Driver's license suspended, or revoked.
- e. History of moving violations or accidents not disclosed on the "Driver Application Form."
- f. 7 or more "points" as described in the Driver Evaluation Worksheet.

2) **Probation (6 months):**

- a. One incident of reckless driving, driving while intoxicated, illegal drug use, hit and run or negligent homicide within a three-year period.
- b. Two preventable accidents during a three-year period.
- c. One accident and/or two moving violations during a three-year period.
- d. Any three moving violations in the past three years.
- e. Four or more "points" as described in the Driver Evaluation Worksheet.

C. Employment Application and Documentation

1) **Drivers Written Employment Application**

2) **Physical Qualifications for Drivers**

In accordance with the FMCSR regulations, a driver cannot drive a motor vehicle unless that person is physically qualified. The specific media criteria required are those listed in the FMCSR regulations, including the instructions

for the physician on performing and recording the examination. Drivers are required to carry an original or photographic copy of a medical examiners certificate at all times and shall be given a copy to be retained within the driver's qualification file. In accordance with FMSCR regulations, a driver must be reexamined and certified once every 36 months, or if the ability to perform normal duties has been impaired by a physical or mental injury, or disease.

3) **Controlled Substance Testing**

Our Company requires drivers of the following vehicles to be tested for use of certain controlled substances:

- All drivers of commercial vehicles with a GVWR above 26,000 lbs.
- Drivers of vehicles designed to transport 16 or more passengers or is placarded for hazardous material.

The controlled substance testing is to be performed by having a urine sample analyzed for indication of marijuana, cocaine, opiates, amphetamines and/or phencyclidine use. Please refer to the company Drug and Alcohol testing policy.

D. **Reference Checks**

- 1) Investigation & Inquiries will be performed within 30 days of Employment start.
- 2) This company will obtain a Motor Vehicle Driving Record Report, from every state in which the driver has held a license, for the previous three years.
- 3) This company will make a personal visit, telephone call, or send a letter to verify the driver's employment record for the preceding three years.

E. **Motor Vehicle Records**

Every 12 months a driver must prepare and submit to the company a list of all violations of motor vehicle traffic laws and ordinances which the driver was convicted of or forfeited bond for during the previous months.

Drivers with commercial license are required to provide information to the company, in writing, within 30 days of a conviction.

All Motor Vehicle Records will be reviewed by management and evaluated against the set criteria listed in the Driver Evaluation System.

F. **Road Test**

A road test must be successfully completed by a driver applicant and a certificate of completion issued or the driver cannot be hired. The driver will be observed by fleet safety official for successful completion of the following:

- 1) Pre-trip inspection performance.
A driver must complete and log a pre-trip inspection report that covers at a minimum the following parts and accessories:
 - a. Service brakes, including trailer brake connections
 - b. Parking (hand) brake
 - c. Steering mechanism
 - d. Lighting devices and reflectors
 - e. Tires
 - f. Horn
 - g. Windshield wipers

- h. Rear vision mirrors
 - i. Coupling devices
 - j. Wheels and rims
 - k. Emergency equipment
- 2) Placing the vehicle in operation.
 - 3) Use of vehicle controls and emergency equipment.
 - 4) Operating vehicle in traffic and while passing other vehicles.
 - 5) Turning the vehicle.
 - 6) Braking and slowing the vehicle by means other than braking.
 - 7) Backing and parking the vehicle.

Our Company will accept a valid operator's license issued within the past three years for the vehicle class to be driven in lieu of giving an actual road test.

G. Probationary Period

Driver Qualification File:

Our Company maintains records on employees hired to operate fleet vehicles. The records may include the following:

- 1) A completed driver's application form.
- 2) A copy of the driver's license.
- 3) The responses of State agencies and past employers concerning the driver's driving and employment record.
- 4) A copy of the certificate of road test, or waiver.
- 5) A copy of the written examination completed certificate and the examination questions and the applicant's answers.
- 6) A copy of the medical examiner's certificate and waiver letter if applicable.
- 7) The annual review of the driver's Motor Vehicle Record by Management.
- 8) Annual Certification of Violations submitted by the employee.

Note: The copy of medical examiner's certificate and waiver letter, if applicable, and the annual review of the driver's violation record may be purged from the driver's qualification file after 3 years from the date of hire.

Driver Supervision

A. Disciplinary Action Program - Our Company considers certain driving activity to be unacceptable. A program has been established to demonstrate criteria that are considered unacceptable driving activity along with a corresponding list of appropriate disciplinary actions that can be taken by management. The following is a non-exclusive list of the program:

- 1) In the event a driver receives a total of seven or more points within a one-year period, the driver will be terminated.
- 2) A driver who receives a point or points for a moving violation will be issued a verbal warning. In addition, the driver will receive the appropriate retraining in accordance with the offense and with each offense thereafter. If the driver receives any additional points within six months, the driver will receive a written warning. Should the driver receive any additional points within the next three months, the driver will receive a suspension from work. If the employee returns to work and receives one or more points during the next three months, the driver will be terminated.
- 3) Driver Point System: A category of points will be assigned for each occurrence.
Category Points:

- a. Contact with any part of our vehicle with a stationary object resulting in damage. **(2 Pts.)**
- b. Backing up accident resulting in damage to property or any other vehicle where the police are not involved. **(3 Pts.)**
- c. Report from the public that a driver is driving too fast, too slow, weaving in or out of lanes in a non-emergency driving situation. **(1 Pt.)**
- d. Report from management that a driver is driving too fast, too slow, weaving in or out of lanes in a non-emergency driving situation. **(2 Pts.)**
- e. Any accident where our driver receives a warning or ticket from the police on scene. **(3 Pts.)**
- f. Any moving violation where the police stops our vehicle for a violation. **(3 Pts.)**
- g. Any accident where our vehicle was driven too fast for the road conditions. **(2 Pts.)**

B. Accident Review Procedures- All accidents and incidents must be promptly reported to the company and will be reviewed by management.

- 1) Reporting - An accident report form must be completed by the driver immediately after an accident.
- 2) Investigation - All accident investigations will be investigated by management to determine the cause of the accident in order to perform the following, if necessary:
 - a. Instruct and Counsel the driver to prevent recurrence.
 - b. Identify poor maintenance procedures or vehicle condition.
 - c. Identify extra-hazardous routes and consider alternatives.
 - d. Identify accident trends.
 - e. Serve as a basis for a driver disciplinary action program.

C. Promotion of Safety - Managers, working in concert with drivers, will continuously stress the importance of driving safely through:

- 1) Safety Meetings
- 2) Supervisory contacts
- 3) Posters
- 4) Driver handout materials
- 5) A checks and balances audit by managers to ensure compliance with complete program implementation by all levels of employees.

D. Monitoring Driving Activities - A method to adequately monitor the driving activities of drivers has been developed. Based upon the operation, one or more of the following may be required:

- 1) Check-in/check-out
- 2) Call in procedures
- 3) Checkpoints
- 4) Vehicle operation recording devices
- 5) Road Observations

E. Road Observations

Supervision of operations through the use of a road observation program allows for the direct observation of the actions of drivers, general observation of the condition of vehicles. When performed by a Fleet safety member, supervisor, or management, road observations help to identify road conditions likely to affect operations or cause undue hazards. Road observations will be performed through periodic check rides with the driver or through the use of a road patrol system.

In fairness to all parties involved, vehicle identification, location, time, road conditions, condition of unit, operation of the unit and any information pertinent to a fair evaluation should be recorded, and the observation should be of sufficient duration to provide an accurate analysis (generally 3-5 miles in rural areas and less in urban areas).

Report forms shall be prepared and submitted within 24 hours of the observation to aid identification of the driver. The results shall be communicated to the driver irrespective of whether the observations were favorable or unfavorable. In the event of a serious violation, a meeting with the driver will be held as soon as possible to make the driver aware of the problem and to provide instruction, counseling, or take any other corrective action necessary.

F. Prohibited Use of Company Vehicle

The Company vehicle may not be used for any illegal activity or in a manner that is reasonably foreseeable to be detrimental to the best interests of the Company. By doing so, the employee will lose his/her Company vehicle driving privileges immediately and corrective action may be taken. The following non-exhaustive list gives examples of what the Company vehicle may not be used for:

- Hire or reward for transporting goods or passengers.
- Driving while under the influence of any substance adversely impacting safe operation of the fleet car (alcohol, prescription or illegal drugs, etc.). This includes having an open container of alcohol in the Company vehicle.
- Racing, speeding or other competitive vehicle activities.
- Business purposes other than that of the Company.
- Giving transportation to hitchhikers.
- Running emergency calls, e.g., volunteer firemen or police emergency runs.
- Travel into Foreign Countries.
- Unauthorized drivers, e.g., only authorized drivers may drive a Company vehicle.
- Towing or pushing another vehicle or other device. No towing equipment, permanent or temporary, may be attached.
- Unauthorized permanent attachments such as bumper or window stickers, unless mandated by state or city ordinances or residential homeowners associations. If there are questions, contact Fleet Administration.

G. Alcohol or Illegal Drugs

While operating a Company vehicle, whether for personal or business reasons, employees or other authorized drivers are prohibited from using, selling, purchasing, possessing or being under any influence of the following:

- Illegal drugs.
- Alcoholic beverages of any type.

Open containers of alcoholic beverages of any type are prohibited in company vehicles at all times. Violations of this nature will result in immediate revocation of the Company vehicle driving privileges. Corrective action, up to and including termination, will be taken. Human Resources should be notified immediately of any violations involving drugs or alcohol.

H. Personal Use

Employees are permitted moderate personal use of a Company vehicle. In the event an accident occurs during unauthorized use, the employee will be held personally responsible for all damages and expense to the Company.

I. **Smoking:** Smoking is not permitted in a Company vehicle.

Fleet Operating Safety Rules

Vehicle Operational Rules

- 1) All federal, state, county, and local laws, ordinances, and regulations must be followed.
- 2) No ill or fatigued drivers will be permitted to operate fleet vehicles.
- 3) Driving under the influence of drugs or alcohol is cause for immediate dismissal.
- 4) Speeding is absolutely forbidden; trips are scheduled so that the driver is not required to exceed any speed limit on the route to be traveled.
- 5) Vehicle pre-trip inspection reports must be completed and handed to the manager prior to departure from the physical plant.
- 6) Safe loading procedures must be followed and verification of cargo is to take place within the first 25 miles after beginning the trip.
- 7) Drivers required to wear corrective lenses or hearing aids in order to meet the minimum physical requirements must have them on while driving and must have a spare power source for the hearing aid.
- 8) Railroad crossings require a mandatory stop not closer than 15 feet or further than 30 feet to the tracks. Drivers are required to listen and look in each direction along the tracks for an approaching train. When it is safe to do so, the driver will cross the tracks in a gear that permits the vehicle to complete the crossing without a change of gears while crossing the tracks.
- 9) Drivers must exercise extreme caution when hazardous conditions (such as those caused by snow, ice, sleet, fog, mist, rain, dust, or smoke) affect visibility or traction. Drivers must stop the vehicle if conditions become too hazardous.
- 10) Turn signals must be on for at least 100 feet in advance of a turn or lane change and while actually making such movements.
- 11) Turn signals must be used to indicate the direction of travel while leaving a parking position and while entering a stream of traffic.
- 12) Wearing a seat belt and shoulder harness is mandatory while operating a company vehicle.
- 13) While driving a slow moving vehicle on a steep incline or similar situation, drivers may turn on vehicle hazard warning signal flashers to warn other drivers of the presence of a potential traffic hazard.
- 14) No vehicle may be left unattended until it has been turned off, the parking brake has been securely set and wheels have been chocked.
- 15) No vehicle is to be left standing or parked on the traveled portion of a highway, if it can be avoided.
- 16) If a vehicle must be stopped on the highway or shoulder for an emergency, the driver must immediately activate the hazard warning flashers and properly place the hazard warning devices within ten minutes of stopping.
- 17) Where lighting conditions are insufficient to make a disabled vehicle visible from 500 feet away three emergency warning devices must be placed to warn other vehicles. The devices must be placed in the following locations:
 - At the traffic side within ten (10) feet of the stopped vehicle.
 - At a distance of 100 feet from the stopped vehicle in the lane occupied by the vehicle and in the direction toward traffic approaching in that lane.
 - At 100 feet from the stopped vehicle in the opposite direction of those above for a two-way road.

If a one-way road or a divided highway the third warning device would be placed 200 feet from the stopped vehicle in a direction toward approaching traffic.

18) Head lamps are to be used 1/2 hour after sunset.

- 19) The high beam lamps must be used when there is no on-coming vehicle within 500 feet.
- 20) "Driver's Accident Report Kit" must be used if involved in an accident.
- 21) A driver must notify the Company if his/her license is revoked, suspended or withdrawn.
- 22) Engines must be turned off while fueling the vehicle.
- 23) No smoking or open flame is allowed in the vicinity of a vehicle being fueled.
- 24) No unauthorized riders allowed.
- 25) Required placards shall always be in place.
- 26) Talking on a cell phone when driving is not allowed.

Preventive Maintenance

A. Driver Responsibility:

- Drivers shall be assigned to specific vehicles in order to establish accountability for all losses and to instill a sense of pride.
- Drivers will be charged for damage to their vehicle if the accident is deemed chargeable.
- Charges for damage will be deemed chargeable if the driver has not done everything reasonable to avoid the collision.
- Charges will be determined by either the applicable insurance deductible dollar value as established by the declarations page of the insurance policy or the actual dollar value to place the insured property in a condition equal to that prior to the occurrence of the accident.

B. Driver Inspection and Vehicle Inspection Report - Drivers employed by our company are required to complete a pre-trip inspection report prior to departing from the yard. If defects or deficiencies are found they are to be reported and service is to be performed before the vehicle is placed into operation. If the vehicle has no defects or deficiencies, the signed report will be delivered to fleet manager prior to departure. A pre-trip inspection is required from all drivers assigned a fleet vehicle. A legible copy of the last vehicle report must be carried on the power unit. Drivers are expected to report any defect or deficiency discovered during routine operations that could affect safe operation or result in mechanical breakdown of the vehicle.

Note: A Driver's Inspection Report is to be performed at the end of each day's use if the vehicle is operated by multiple drivers and is not permanently assigned. The Drivers Inspection Report shall be filled out at the end of each day's work for each vehicle operated. The following morning the Pre-trip inspection shall take place as with any fleet operated vehicle. This Driver Inspection Report is not required to be performed if drivers are operating only assigned vehicle. Drivers are expected to report any vehicle defects or deficiencies noted during the daily operation. This will be achieved by using the vehicle inspection form. Prior to a vehicle leaving the yard, the vehicle shall be inspected by the driver to ensure that it is in safe operating condition. Any deficiencies found should be reported to the maintenance department for correction before the vehicle leaves the yard. Upon returning to the yard, the driver shall sign-off, indicating any changes in the condition of the vehicle.

C. Vehicle Replacement - Criteria has been established and will be strictly followed for replacement of vehicles due to mileage, maintenance cost, age, and other valid criteria.

D. Scheduled Maintenance - All fleet vehicles will receive regularly scheduled preventative maintenance and repair service.

- All fleet vehicles must be systematically inspected to verify that all parts and accessories necessary for safe and proper operation are in satisfactory condition.
- Each fleet vehicle will have an inspection, repair and maintenance file that includes the following records:
- Make, Model, VIN and Registration number.

- The nature and due date of various inspection and maintenance operations to be performed.
- A record of inspection, repairs, and maintenance indicating operations to be performed.
- A record of inspection, repairs, and maintenance indicating their date and nature.
- A lubricant record.

A record must be maintained within the file for one year after it was generated, six months from the date of departure for vehicles leaving the fleet.

- E. **Glove Box Documents** – The following items must be retained in the glove box: owner’s manual, vehicle registration, insurance I.D., accident report forms, and camera.

Accident Review

A. ACCIDENT REPORTING

1) Driver Responsibility

Our Company realizes that at the time of an accident, the driver may be under extreme stress, thus the procedures to follow must be clear and concise, and thoroughly understood. To help facilitate the information gathering, a “Driver's Accident Report Kit” containing instructions, forms, and camera for use in the event of an accident shall be carried in the vehicle at all times. After protecting the accident scene and, if driver chooses, performing Good Samaritan acts assisting anyone who was injured, the first step in accident reporting is to collect all pertinent information at the scene in a preliminary accident report. After collecting this primary information the driver shall contact management. “At no time shall the driver admit fault.”

2) Management's Responsibility

Upon receiving a call to report an accident, management shall use the accident information telephone checklist for recording the accident data. This data will aid in collecting facts to determine if management must immediately dispatch someone to the accident scene. If there are fatalities, multiple serious injuries, extensive property damage or environmental concerns, it is normally considered desirable to immediately send someone to the accident scene to initiate an investigation. If our driver is injured or killed, an immediate dispatch of a company representative is imperative.

B. ACCIDENT INVESTIGATION

1) Accident Records

A formal accident investigation form shall be completed and sent to the insurance company as soon as practical. Any state or Federal government reports that may be required shall also be sent as soon as practical. The permanent file shall contain all pertinent information concerning the accident, including: the preliminary accident report from the driver, copies of the accident reports submitted to various agencies, and accident investigation data, policy records, police reports, witness reports and any other information which might be useful in evaluating the accident.

An “Accident Register” will be created in a computer database, in order to chronologically record all accidents, to provide management with an overall summary. The accident register shall include at least the following information: Date of accident, name of driver, vehicle identification numbers, location of the accident, brief description of accident, numbers of fatalities, number of injuries, amount of property damage and specific amount and type of fuel spilled.

2) Accident Analysis

Proper accident analysis involves gathering of facts, arranging them in usable form, and analyzing what transpired. A properly developed accident reporting and recording system will allow management to determine not only the "primary" causes of accidents but also "contributing" causes that might otherwise be overlooked.

The investigation of each accident shall not merely seek the specific act that was involved, but shall go farther into conditions responsible so as to avoid similar accidents in the future. A determination shall be made as to whether the accident was a "preventable accident" on the part of the company's driver. This is irrespective of the legal conditions surrounding the accident, as preventability relates to "defensive driving" and not to legal culpability. A preventable accident is one in which the driver failed to exercise every reasonable precaution to prevent the accident.

The investigation must include:

- 1) Checking the driver's record for similar occurrences, length of service and indications of poor attitude or lack of skill.
- 2) Questioning whether a proper job of selecting was done, whether training was adequate, and if the driver was properly supervised.
- 3) Determining if there were previous indications that could have signaled the probability of an accident.
- 4) Evaluating whether a scheduling or routing change could have reduced the possibility of an accident.
- 5) Ascertaining if there was any indication of improper maintenance procedures or if an equipment malfunction was involved.
- 6) Evaluation of conditions and stability related to the vehicle's cargo.

DRIVER'S VEHICLE INSPECTION REPORT

Company:					
Address:		City:		Zip code:	
<input type="checkbox"/> Pre-trip	Date:	Time:	<input type="checkbox"/> Post trip	Date:	Time:
Odometer reading:		Starting mileage:		Ending mileage	

Check any defective item and give details under the "Additional comments" sections. Check the for Pre-trip, and the for Post trip inspection.

A. Tractor/Truck number:					
Begin with a walk around using the previous Post Trip inspection					
Engine:	<input type="checkbox"/> Fluid Leaks	<input type="checkbox"/> Battery	<input type="checkbox"/> Radiator	<input type="checkbox"/> Engine	<input type="checkbox"/> Starter
	<input type="checkbox"/> All fluid levels	<input type="checkbox"/> Transmission			
Cab:	<input type="checkbox"/> Oil Pressure	<input type="checkbox"/> Windshield	<input type="checkbox"/> Windows	<input type="checkbox"/> Wiper blades	<input type="checkbox"/> Mirrors
	<input type="checkbox"/> Clutch	<input type="checkbox"/> Dash lights	<input type="checkbox"/> Horn	<input type="checkbox"/> Spare bulbs & fuses	<input type="checkbox"/> Gauges
	<input type="checkbox"/> Fire extinguisher	<input type="checkbox"/> First aid kit	<input type="checkbox"/> Defroster/heater	<input type="checkbox"/> Reflective triangles & flares	
Walk-Around:	<input type="checkbox"/> Body	<input type="checkbox"/> Coupling devices	<input type="checkbox"/> Mud flaps	<input type="checkbox"/> Fuel tanks	<input type="checkbox"/> Tire chains
	<input type="checkbox"/> Rear end	<input type="checkbox"/> Fluid leaks	<input type="checkbox"/> Tarpaulin	<input type="checkbox"/> Tires	<input type="checkbox"/> Muffler
	<input type="checkbox"/> Suspension system	<input type="checkbox"/> Drive line	<input type="checkbox"/> Wheels & rims	<input type="checkbox"/> Lug nuts	<input type="checkbox"/> Front axle
Lights:	<input type="checkbox"/> Brake lights	<input type="checkbox"/> Warning lights	<input type="checkbox"/> Reflectors	<input type="checkbox"/> Headlights	<input type="checkbox"/> Turn signals
Brake:	<input type="checkbox"/> Air lines	<input type="checkbox"/> Brake Accessories	<input type="checkbox"/> Parking brakes	<input type="checkbox"/> Air Compressor	<input type="checkbox"/> Service brake
System:	Brake lighting thickness: _____		Slack adjustor measurements: _____		
Other:					

B. Trailer(s) number(s):	Starting Mileage (from hub):			
<input type="checkbox"/> Brake connections	<input type="checkbox"/> Brakes	<input type="checkbox"/> Tires	<input type="checkbox"/> Coupling devices	<input type="checkbox"/> Doors
<input type="checkbox"/> Hitch	<input type="checkbox"/> Landing gear	<input type="checkbox"/> Lights	<input type="checkbox"/> Roof	<input type="checkbox"/> Tarpaulin
<input type="checkbox"/> Suspension system	<input type="checkbox"/> Wheels & rims	<input type="checkbox"/> Lug nuts	<input type="checkbox"/> Coupling (king) pin	
<input type="checkbox"/> Attenuator bolts	<input type="checkbox"/> Attenuator pins	<input type="checkbox"/> Other		

Additional comments:

C. Aerial device component inspection:					
<input type="checkbox"/> Fluid leaks	<input type="checkbox"/> Fasteners	<input type="checkbox"/> All fluid levels	<input type="checkbox"/> Power take-off	<input type="checkbox"/> Liner	
<input type="checkbox"/> Outriggers	<input type="checkbox"/> Hydraulic system	<input type="checkbox"/> Retaining pins	<input type="checkbox"/> Welds	<input type="checkbox"/> Bucket	
<input type="checkbox"/> Fiberglass extension	<input type="checkbox"/> Safety belts & straps	<input type="checkbox"/> Test ground controls	<input type="checkbox"/> Test bucket lift controls		
Other:					

Additional comments:

Condition of the above vehicle is satisfactory?		<input type="checkbox"/> Yes	<input type="checkbox"/> No
Pre-trip Driver Print Name:		Post trip Driver Print Name:	
Pre-trip Driver Signature:		Post trip Driver Signature:	
<input type="checkbox"/> Above defects need not be corrected for safe operation of this vehicle		<input type="checkbox"/> Above defects have been corrected	
Mechanic's signature:		Driver's signature:	
Date:		Date:	

Vehicle Inspection Points

Combination

Front of Vehicle, Lights/Reflectors,
Engine Compartment & Steering

- Steering Axle
 - Suspension
 - Brakes
 - Tires

- Driver Door
Fuel Area

- Under Vehicle
 - Drive Shaft
 - Exhaust
 - Frame

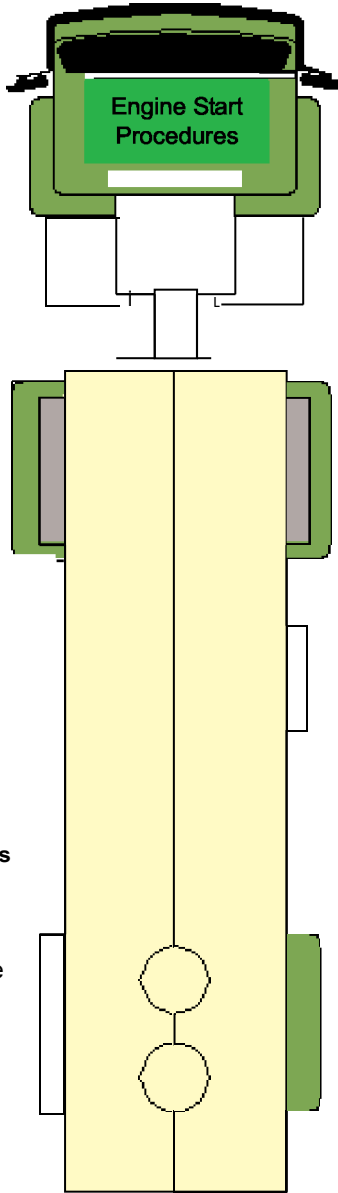
- Drive Axle(s)
 - Suspension
 - Brakes
 - Tires

- Coupling Devices
 - Truck
 - Trailer

- Rear of
Truck/Tractor &
Lights/Reflectors

- Trailer Components
 - Front, Side, Lights
& Reflectors
 - Frame
 - Landing Gear
 - Tandem Release

- Trailer Axle(s)
 - Suspension
 - Brakes
 - Tires



Rear of Trailer and
Lights/Reflectors

Straight Truck or

Front of Vehicle, Lights/Reflectors,
Engine Compartment & Steering

- Steering Axle
 - Suspension
 - Brakes
 - Tires

- Driver Door
Fuel Area

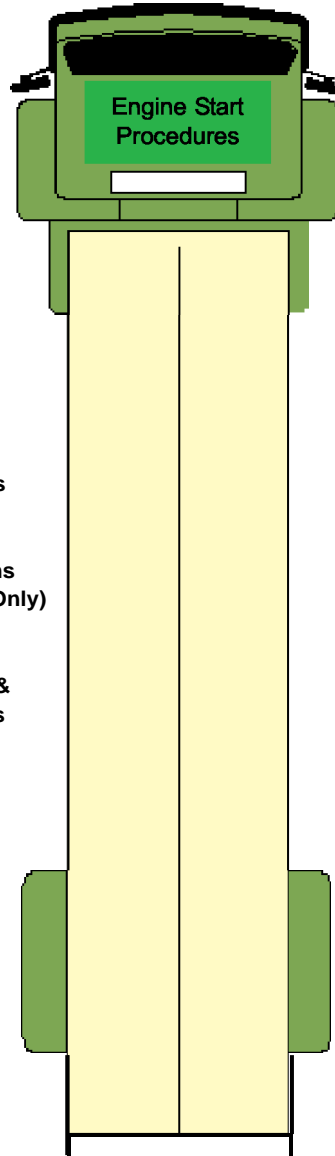
- Under Vehicle
 - Drive Shaft
 - Exhaust
 - Frame

- Passenger items
(Buses Only)

- School Bus Items
(School Buses Only)

- Side of Vehicle &
Lights/Reflectors

- Drive Axle(s)
 - Suspension
 - Brakes
 - Tires



Rear of Vehicle and
Lights/Reflectors

Road Test Evaluation Form

Commercial Vehicle

Current Class	Current Endorsements	Current Restrictions	Signature of Motorist	Date of Birth / /
New Class	Endorsements <input type="checkbox"/> Add		Employee Identification No. or Driver License No.	
Restrictions <input type="checkbox"/> Add		Restrictions <input type="checkbox"/> Remove	Full Name (print)	
Plate Number(s):	Examiner & Number		Post	Test Date / /

A. PRE-TRIP INSPECTION	E. PARKING AND BACKING	RESTRICTIONS &	ENDORSEMENTS
1. Brake Lights 5 2. Signal Lights 5 3. Headlights 5 4. Four-way Flashers 5 5. Horn 5 6. Wipers 5 7. Mirrors 5 8. Tires/wheels 5 9. Suspension system 5 10. Braking system 5 11. Exhaust System 5 12. Safety equipment 5 13. Gauges 5 14. Coupling system (A) 5 15. Emergency exit (bus) 5 16. Passenger entry/exit (bus) 5	1. Fails to signal5 2. Fails to leave cab to check rear of vehicle when backing 15 3. Unable to park properly 15 4. Unable to back straight 15 5. Excessive space/too far from curb 5 6. Excessive maneuvers: <input type="checkbox"/> Backing <input type="checkbox"/> Parking 5 7. Inadequate observation 10	0 01 M N1 S F L1 L2 L	<input type="checkbox"/> Tractor/Trailer (trailer more than 10,000 lbs.) (A) <input type="checkbox"/> Truck/Trailer (truck more than 26,000 lbs. and trailer more than 10,000 lbs.) (A) <input type="checkbox"/> Truck — 26,000 lbs. or less (A) <input type="checkbox"/> Bus — 26,001 lbs. or more(B) <input type="checkbox"/> Bus — 26,000 lbs. or less (C) <input type="checkbox"/> Bus —Adult seating capacity 8 through 14 <input type="checkbox"/> School Bus — 26,001 lbs. or more (B) <input type="checkbox"/> School Bus —Adult seating capacity 15 or more (B, C) <input type="checkbox"/> Truck — 26,001 lbs. or more (B) <input type="checkbox"/> Truck — 26,000 lbs. or less (C) <input type="checkbox"/> Non-CDL C (18,001 - 26,000 lbs.) (cannot have H or P Endorsement) <input type="checkbox"/> Farm Vehicle —A <input type="checkbox"/> Farm Vehicle — B <input type="checkbox"/> Air Brakes (Yes) <input type="checkbox"/> No Air Brakes (A) <input type="checkbox"/> No Air Brakes (B) <input type="checkbox"/> No Air Brakes Any Vehicle
B. BRAKE SYSTEMS 1. Static check 10 2. Warning device check (air) 10	F. DRIVING IN TRAFFIC/HIGHWAY DRIVING 1. Fails to keep right 10 2. Improper lane of traffic 10 3. Follows too closely 10 4. Speed excessive for conditions: <input type="checkbox"/> Traffic <input type="checkbox"/> Road <input type="checkbox"/> Weather 15 5. Too slow/impedes traffic 15 6. Fails to yield right-of-way to: <input type="checkbox"/> Pedestrians <input type="checkbox"/> Other 15 7. Poor judgment in traffic <input type="checkbox"/> Entering <input type="checkbox"/> Exiting <input type="checkbox"/> Observing <input type="checkbox"/> Other 10 8. When changing lanes, fails to: <input type="checkbox"/> Observe <input type="checkbox"/> Signal <input type="checkbox"/> Use caution . . 10 9. Fails to anticipate actions of: <input type="checkbox"/> Pedestrians <input type="checkbox"/> Other 10 10. Fails to anticipate hazards 10 11. Fails to identify road hazards 10		
C. LEAVING CURB 1. 50 foot brake check 15 2. Insufficient air (less than 90 psi)... 20 3. Fails to observe 10 4. Fails to signal 5	G. GENERAL DRIVING SKILLS 1. Repeated stalling 10 2. Poor engine control/acceleration 10 3. Poor steering control: <input type="checkbox"/> Turning <input type="checkbox"/> Straight driving <input type="checkbox"/> Maneuvers 10 4. Delayed/abrupt braking 10 5. Poor use of gears: <input type="checkbox"/> Automatic <input type="checkbox"/> Standard 10 6. Poor clutch control 10 7. Poor reaction to emergencies 10 8. Railroad Tracks: <input type="checkbox"/> Observing <input type="checkbox"/> Shifting <input type="checkbox"/> Stopping . . 15 9. Rolling on grade 10		
D. TURNING INTERSECTIONS AND CURVES 1. Poor judgment at approaching intersection or curve: <input type="checkbox"/> Speed <input type="checkbox"/> Turning <input type="checkbox"/> Stopping <input type="checkbox"/> Observing <input type="checkbox"/> Signaling <input type="checkbox"/> Shifting 10 2. Fails to stop near center of intersection when waiting to turn left on green10 3. Turns wide short right 5 4. Turns wide short left..... 5 5. Inattentive to traffic: <input type="checkbox"/> Signs <input type="checkbox"/> Signals <input type="checkbox"/> Lane markings 10	MEETS STANDARDS FOR LICENSING? <input type="checkbox"/> Yes <input type="checkbox"/> No REASON FOR DISQUALIFICATION: <input type="checkbox"/> Accident <input type="checkbox"/> Serious Violation <input type="checkbox"/> Dangerous Action <input type="checkbox"/> Additional Training Needed and/or More Than 50 Points		
COMMENTS:		TOTAL POINTS	

VEHICLE ACCIDENT REPORT

	Department	Division	Section		RMS NO. (For RMS use only)			
FACTS	ACCIDENT/INCIDENT LOCATION Street Address/Intersecting Street or Highway No. and Mile Post No.				<input type="checkbox"/> Intersection <input type="checkbox"/> NonIntersection			
	CITY		<input type="checkbox"/> Inside <input type="checkbox"/> Outside	County	Weather			
	DATE OF INCIDENT	Day of Week	Hour	<input type="checkbox"/> A.M. <input type="checkbox"/> P.M.	No. of Vehicles Involved	No. Persons Injured		
	MOTOR VEHICLE INVOLVED WITH		1. <input type="checkbox"/> Pedestrian	2. <input type="checkbox"/> Other Motor Vehicle	3. <input type="checkbox"/> Fixed Object	4. <input type="checkbox"/> Other _____		
VEHICLE	Year	Make	Model	License No.	State			
	Motor Pool Vehicle Yes or No	Vehicle No.	Removed To		Removed By			
	Last Name		First	MI	Point of Impact on Vehicle	Est. Cost Repair		
	Address			City, State, Zip	Phone H _____ W _____			
	Job Classification	Department/Division/Section		Driver License No.	<input type="checkbox"/> Operator <input type="checkbox"/> Chauffeur	Exp. Date	Stat	
OTHER VEHICLE <small>(More than 1 attach sheet)</small>	OTHER VEHICLE	Year	Make	Type	License No.	Stat	Vehicle No.	
	VEHICLE	Removed To		Removed By	Point of Impact on Vehicle	Est. Cost Repair		
	OWNER	Last Name		First	MI	Address	City, State	Phone H _____ W _____
		Last Name		First	MI	Address	City, State	Phone H _____ W _____
		Insured By		Driver's License No.			Exp. Date	Stat
	Damage to Property of Other Than Vehicle					Est. Cost Repair		
	Name and Address of Owner of Property							
INJURIES	Last Name		First	MI	Address	Phone H _____ W _____		
	Description of Injury							
	Last Name		First	MI	Address	Phone H _____ W _____		
	Description of Injury							
	Last Name		First	MI	Address	Phone H _____ W _____		
Description of Injury								

For additional injuries submit on separate

