

# GET STARTED



## *Motor Carrier Division*

A “*How To*” booklet on getting your motor carrier company in compliance with the transportation safety regulations.

**June 1, 2016**

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## **INTRODUCTION**

The Utah Motor Carrier Division has produced this “Get Started” booklet for the benefit of those motor carriers who recently received their authorization to operate (their DOT number) or have their DOT number but have not received education in the transportation safety regulations pertaining to their motor carrier operations.

This booklet provides basic compliance guidance to the Motor Carrier Safety Regulations. However, it is not intended to be a substitute for these regulations. To purchase a complete copy of the Federal Motor Carrier Safety Regulations (FMCSR), Parts 300-399, contact the Superintendent of Documents, U. S. Government Printing Office, Washington, D.C. 20402, telephone: (202) 512-1800 or at [www.access.gpo.gov](http://www.access.gpo.gov).

Our overall goal is to improve the safe transportation of passengers and goods on the State’s highways, through a coordinated effort of Federal, State, and industry organizations to reduce fatalities, injuries, property damage and hazardous materials incidents.

This booklet is comprised of two main sections, one pertaining to all motor carriers, and a second section pertaining to motor carriers having vehicles with a gross vehicle weight rating of 26,001 pounds or more. Each section contains information sheets covering highlights of the regulation. Please feel free to reproduce any or all material in this booklet and to distribute copies as needed.

It is the responsibility of motor carrier operators and drivers to know and comply with all applicable FMCSR. Safety compliance and safe operations translate into saved lives and property. We believe the information in this booklet, when effectively applied, will get you started on the road to compliance with the FMCSR and will contribute to safer motor carrier operations and highways. For additional questions please contact:

**Utah Department of Transportation  
Motor Carrier Division  
4501 South 2700 West, Box 148240  
Salt Lake City, UT 84114-8240  
Phone: (801) 965-4892  
Fax: (801) 965-4847**

### **Disclaimer**

The purpose of this booklet is to provide the information and forms a motor carrier, residing in Utah, needs to get started in their quest to become compliant with the Motor Carrier Safety Regulations. This booklet is not intended to take the place of published Federal agency regulations. It only paraphrases the Federal Motor Carrier Safety Regulations published in Title 49 of the U.S. Code of Federal Regulations. The contents of this booklet may not be relied upon as a substitute for the official text. The regulations issued by the U.S. Department of Transportation and its Operating Administrations are published in the Federal Register and compiled in the U.S. Code of Federal Regulations (CFR). Copies of appropriate volumes of the CFR in book format may be purchased from the Superintendent of Documents, U.S. Government Printing Office or examined at many libraries.

## **HOW TO USE THIS BOOKLET**

To use this booklet all you need to do is answer a couple of questions and turn to the corresponding section. It's that easy! Just follow the steps below and you are getting started on the road to complying with the transportation safety regulations.

**Step 1:** Do you – the motor carrier – have a motor vehicle or a combination of motor vehicles which:

- Has a gross vehicle weight rating or gross combination weight rating of 10,001 pounds or more, whichever is greater; or
- Is designed or used to transport more than 8 passengers in interstate (including the driver) for compensation; or
- Is designed or used to transport more than 15 passengers, including the driver, and not for compensation; or
- Is used in transporting material found by the Secretary of Transportation to be hazardous in a quantity requiring placarding.

If your answer is “**No**” to the above four questions, then you can give this booklet to a friend who is a motor carrier, because your vehicles are not regulated by the Federal Motor Carrier Safety Regulations.

If your answer is “**Yes**” then you need to start with Section One of this booklet. All motor carriers, with vehicles having a gross vehicle weight rating of 10,001 or more pounds must comply with **all** of the requirements (yes, there are exceptions) listed in Section One.

**Step 2:** Do you – the motor carrier – have a motor vehicle or a combination of motor vehicles which:

- Has a gross combination weight rating of 26,001 pounds inclusive of a towed unit with a gross vehicle weight rating of more than 10,000 pounds; or
- Has a gross vehicle weight rating of 26,001 or more pounds; or
- Is designed to transport 16 or more passengers, including the driver; or
- Is of any size and is used in the transportation of materials found to be hazardous for the purposes of the Hazardous Materials Transportation Act and which require the motor vehicle to be placarded.

If “**No**” then all you need to get started is to comply with Section One.

If “**Yes**” then you need to comply with the requirements listed in Section Two of this booklet... **in addition to** the requirements listed in Section One.

# Title 49 CFR, Part 387

## Minimum Levels of Financial Responsibility for Motor Carriers

Financial responsibility means having insurance policies or surety bonds sufficient to satisfy the minimum public liability requirements. Public liability means liability for bodily injury, property damage and environmental restoration. Environmental restoration means restitution for the loss, damage or destruction of natural resources arising out of an accidental discharge of toxic or other environmentally harmful materials or liquids.

Requirements for  
Financial  
Responsibility

Motor Carriers of property operating commercial motor vehicles in interstate commerce and for hire carriers of passengers operating in interstate/intrastate or foreign commerce must have at least the minimum amount of insurance required by law.  
(See Schedule of Limits in this folder for Minimum levels of Financial Responsibility.)

The motor carrier must have proof of the minimum level of insurance at the Company's principal place of business.

Proof

Proof may be shown by any of the following:

### **MCS-90**

- Endorsements for Motor Carriers of Property policies of insurance for public liability under Sections 39 and 30 of the Motor Carrier Act of 1980 (Form MCS-90) issued by an insurer.
- Endorsements for Motor Carriers of Passengers policies of insurance for public liability under Sections 18 of the Bus Regulatory Reform Act of 1982 (Form MCS-90B)

### **MCS-82 (Surety Bond)**

- A motor carrier surety bond for public liability under Section 30 of the Motor Carrier Act of 1980 (Form MCS-82) issued by a surety.
- A motor carrier of Passengers Surety Bond for public liability under Section 18 of the Bud Regulatory Act of 1982 (Form MCS-82B\*)
- A written decision, order or authorization of the interstate Commerce Commission authorizing the motor carrier to self-insure under 49 CFR 1043.5

Utah

**Administrative  
Rule**

### **R909-1-2. Adoption of Federal Regulations.**

Licensed child care providers operating a passenger vehicle with a seating capacity of not more than 30 passengers, and wholly in intrastate commerce, are exempt from 49 CFR Part 387 Subpart B but are subject to the minimum coverage requirements in Section 72-9-103

### **R909-1-3. Insurance for Private Intrastate/Interstate Motor Carriers.**

- A. Private motor carrier means a person who provides transportation of property or passengers by commercial motor vehicle, and is not a for-hire carrier.
- B. All private motor carriers shall have a minimum amount of **\$750,000 liability**.

**Utah  
Administrative  
Rule (cont.)**

C. All intrastate for-hire and private motor carriers transporting any quantities of oil listed in 49 CFR 172.101; hazardous waste, hazardous material and hazardous substances defined in 49 CFR 171.101, shall have \$1,000,000 minimum level of financial responsibility and a MCS-90 endorsement maintained at the principal place of business.

A Federal Agency may not conduct or sponsor, and a person is not required to respond to, nor shall a person be subject to a penalty for failure to comply with a collection of information subject to the requirements of the Paperwork Reduction Act unless that collection of information displays a current valid OMB Control Number. The OMB Control Number for this information collection is 2126-0008. Public reporting for this collection of information is estimated to be approximately 2 minutes per response, including the time for reviewing instructions, gathering the data needed, and completing and reviewing the collection of information. All responses to this collection of information are mandatory. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden to: Information Collection Clearance Officer, Federal Motor Carrier Safety Administration, MC-RRA, Washington, D.C. 20590.



Endorsement for Motor Carrier Policies of Insurance for Public Liability  
under Sections 29 and 30 of the Motor Carrier Act of 1980

# FORM MCS-90

Issued to \_\_\_\_\_ of \_\_\_\_\_  
*(Motor Carrier name)* *(Motor Carrier state or province)*

Dated at \_\_\_\_\_ on this \_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_

Amending Policy Number: \_\_\_\_\_ Effective Date: \_\_\_\_\_

Name of Insurance Company: \_\_\_\_\_

Countersigned by: \_\_\_\_\_  
*(authorized company representative)*

The policy to which this endorsement is attached provides primary or excess insurance, as indicated for the limits shown *(check only one)*:

- This insurance is primary and the company shall not be liable for amounts in excess of \$\_\_\_\_\_ for each accident.
- This insurance is excess and the company shall not be liable for amounts in excess of \$\_\_\_\_\_ for each accident in excess of the underlying limit of \$\_\_\_\_\_ for each accident.

Whenever required by the Federal Motor Carrier Safety Administration (FMCSA), the company agrees to furnish the FMCSA a duplicate of said policy and all its endorsements. The company also agrees, upon telephone request by an authorized representative of the FMCSA, to verify that the policy is in force as of a particular date. The telephone number to call is: \_\_\_\_\_

Cancellation of this endorsement may be effected by the company of the insured by giving (1) thirty-five (35) days notice in writing to the other party (said 35 days notice to commence from the date the notice is mailed, proof of mailing shall be sufficient proof of notice), and (2) if the insured is subject to the FMCSA's registration requirements under 49 U.S.C. 13901, by providing thirty (30) days notice to the FMCSA (said 30 days notice to commence from the date the notice is received by the FMCSA at its office in Washington, DC).

## DEFINITIONS AS USED IN THIS ENDORSEMENT

**Accident** includes continuous or repeated exposure to conditions or which results in bodily injury, property damage, or environmental damage which the insured neither expected nor intended.

**Motor Vehicle** means a land vehicle, machine, truck, tractor, trailer, or semitrailer propelled or drawn by mechanical power and used on a highway for transporting property, or any combination thereof.

**Bodily Injury** means injury to the body, sickness, or disease to any person, including death resulting from any of these.

**Property Damage** means damage to or loss of use of tangible property.

**Environmental Restoration** means restitution for the loss, damage, or destruction of natural resources arising out of the accidental discharge, dispersal, release or escape into or upon the land, atmosphere, watercourse, or body of water, of any commodity transported by a motor carrier. This shall include the cost of removal and the cost of necessary measures taken to minimize or mitigate damage to human health, the natural environment, fish, shellfish, and wildlife.

**Public Liability** means liability for bodily injury, property damage, and environmental restoration.

*(continued on next page)*

The insurance policy to which this endorsement is attached provides automobile liability insurance and is amended to assure compliance by the insured, within the limits stated herein, as a motor carrier of property, with Sections 29 and 30 of the Motor Carrier Act of 1980 and the rules and regulations of the Federal Motor Carrier Safety Administration (FMCSA).

In consideration of the premium stated in the policy to which this endorsement is attached, the insurer (the company) agrees to pay, within the limits of liability described herein, any final judgment recovered against the insured for public liability resulting from negligence in the operation, maintenance or use of motor vehicles subject to the financial responsibility requirements of Sections 29 and 30 of the Motor Carrier Act of 1980 regardless of whether or not each motor vehicle is specifically described in the policy and whether or not such negligence occurs on any route or in any territory authorized to be served by the insured or elsewhere. Such insurance as is afforded, for public liability, does not apply to injury to or death of the insured's employees while engaged in the course of their employment, or property transported by the insured, designated as cargo. It is understood and agreed that no condition, provision, stipulation, or limitation contained in the policy, this endorsement, or any other endorsement thereon,

or violation thereof, shall relieve the company from liability or from the payment of any final judgment, within the limits of liability herein described, irrespective of the financial condition, insolvency or bankruptcy of the insured. However, all terms, conditions, and limitations in the policy to which the endorsement is attached shall remain in full force and effect as binding between the insured and the company. The insured agrees to reimburse the company for any payment made by the company on account of any accident, claim, or suit involving a breach of the terms of the policy, and for any payment that the company would not have been obligated to make under the provisions of the policy except for the agreement contained in this endorsement.

It is further understood and agreed that, upon failure of the company to pay any final judgment recovered against the insured as provided herein, the judgment creditor may maintain an action in any court of competent jurisdiction against the company to compel such payment.

The limits of the company's liability for the amounts prescribed in this endorsement apply separately to each accident and any payment under the policy because of anyone accident shall not operate to reduce the liability of the company for the payment of final judgments resulting from any other accident.

**SCHEDULE OF LIMITS — PUBLIC LIABILITY**

| Type of carriage   | Commodity transported  | January 1, 1985 |
|--|--|-----------------|
| (1) For-hire (in interstate or foreign commerce, with a gross vehicle weight rating of 10,000 or more pounds).   | Property (nonhazardous)  | \$750,000       |
| (2) For-hire and Private (in interstate, foreign, or intrastate commerce, with a gross vehicle weight rating of 10,000 or more pounds).  | Hazardous substances, as defined in 49 CFR 171.8, transported in cargo tanks, portable tanks, or hopper-type vehicles with capacities in excess of 3,500 water gallons; or in bulk Division 1.1, 1.2, and 1.3 materials, Division 2.3, Hazard Zone A, or Division 6.1, Packing Group I, Hazard Zone A material; in bulk Division 2.1 or 2.2; or highway route controlled quantities of a Class 7 material, as defined in 49 CFR 173.403. | \$5,000,000     |
| (3) For-hire and Private (in interstate or foreign commerce, in any quantity; or in intrastate commerce, in bulk only; with a gross vehicle weight rating of 10,000 or more pounds). | Oil listed in 49 CFR 172.101; hazardous waste, hazardous materials, and hazardous substances defined in 49 CFR 171.8 and listed in 49 CFR 172.101, but not mentioned in (2) above or (4) below.  | \$1,000,000     |
| (4) For-hire and Private (In interstate or foreign commerce, with a gross vehicle weight rating of less than 10,000 pounds).   | Any quantity of Division 1.1, 1.2, or 1.3 material; any quantity of a Division 2.3, Hazard Zone A, or Division 6.1, Packing Group I, Hazard Zone A material; or highway route controlled quantities of a Class 7 material as defined in 49 CFR 173.403.  | \$5,000,000     |

\*The schedule of limits shown does not provide coverage. The limits shown in the schedule are for information purposes only.

A Federal Agency may not conduct or sponsor, and a person is not required to respond to, nor shall a person be subject to a penalty for failure to comply with a collection of information subject to the requirements of the Paperwork Reduction Act unless that collection of information displays a current valid OMB Control Number. The OMB Control Number for this information collection is 2126-0008. Public reporting for this collection of information is estimated to be approximately 2 minutes per response, including the time for reviewing instructions, gathering the data needed, and completing and reviewing the collection of information. All responses to this collection of information are mandatory. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden to: Information Collection Clearance Officer, Federal Motor Carrier Safety Administration, MC-RRA, Washington, D.C. 20590.



Endorsement for Motor Carrier Policies of Insurance for Public Liability under Section 18 of the Bus Regulatory Reform Act of 1982

FORM MCS-90B

Issued to \_\_\_\_\_ of \_\_\_\_\_ (Motor Carrier name) (Motor Carrier state or province)

Dated at \_\_\_\_\_ on this \_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_

Amending Policy Number: \_\_\_\_\_ Effective Date: \_\_\_\_\_

Name of Insurance Company: \_\_\_\_\_

Countersigned by: \_\_\_\_\_ (authorized company representative)

The policy to which this endorsement is attached provides primary or excess insurance, as indicated for the limits shown (check only one):

- Radio button options for primary or excess insurance coverage.

Whenever required by the Federal Motor Carrier Safety Administration (FMCSA), the company agrees to furnish the FMCSA a duplicate of said policy and all its endorsements. The company also agrees, upon telephone request by an authorized representative of the FMCSA, to verify that the policy is in force as of a particular date. The telephone number to call is: \_\_\_\_\_

Cancellation of this endorsement may be effected by the company of the insured by giving (1) thirty-five (35) days notice in writing to the other party (said 35 days notice to commence from the date the notice is mailed, proof of mailing shall be sufficient proof of notice), and (2) if the insured is subject to the FMCSA's registration requirements under 49 U.S.C. 13901, by providing thirty (30) days notice to the FMCSA (said 30 days notice to commence from the date the notice is received by the FMCSA at its office in Washington, DC).

DEFINITIONS AS USED IN THIS ENDORSEMENT

Accident includes continuous or repeated exposure to conditions or which results in bodily injury, property damage, or environmental damage which the insured neither expected nor intended.

Bodily Injury means injury to the body, sickness, or disease to any person, including death resulting from any of these.

Motor Vehicle means a for-hire carrier of passengers by motor vehicle.

Property Damage means damage to or loss of use of tangible property.

Public Liability means liability for bodily injury, property damage, and environmental restoration.

(continued on next page)

The insurance policy to which this endorsement is attached provides automobile liability insurance and is amended to assure compliance by the insured, within the limits stated herein, as a for-hire motor carrier of passengers with Section 18 of the Bus Regulatory Reform Act of 1982 and the rules and regulations of the Federal Motor Carrier Safety Administration.

In consideration of the premium stated in the policy to which this endorsement is attached, the insurer (the company) agrees to pay, within the limits of liability described herein, any final judgment received against the insured for public liability resulting from negligence in the operation, maintenance or use of motor vehicles subject to the financial responsibility requirements of Sections 18 of the Bus Regulatory Reform Act of 1982 regardless of whether or not each motor vehicle is specifically described in the policy and whether or not such negligence occurs on any route or in any territory authorized to be served by the insured or elsewhere. Such insurance as is afforded, for public liability, does not apply to injury to or death of the insured's employees while engaged in the course of their employment, or property transported by the insured, designated as cargo. It is understood and agreed that no condition, provision, stipulation, or limitation contained in the policy, this endorsement, or any other endorsement thereon, or violation thereof, shall relieve the company from liability or from

the payment of any final judgment, within the limits of liability herein described, irrespective of the financial condition, insolvency or bankruptcy of the insured.

However, all terms, conditions, and limitations in the policy to which the endorsement is attached shall remain in full force and effect as binding between the insured and the company. The insured agrees to reimburse the company for any payment made by the company on account of any accident, claim, or suit involving a breach of the terms of the policy, and for any payment that the company would not have been obligated to make under the provisions of the policy except for the agreement contained in this endorsement.

It is further understood and agreed that, upon failure of the company to pay any final judgment recovered against the insured as provided herein, the judgment creditor may maintain an action in any court of competent jurisdiction against the company to compel such payment.

The limits of the company's liability for the amounts prescribed in this endorsement apply separately to each accident and any payment under the policy because of any one accident shall not operate to reduce the liability of the company for the payment of final judgments resulting from any other accident.

**SCHEDULE OF LIMITS — PUBLIC LIABILITY**  
For-hire motor carriers of passengers  
operating in interstate or foreign commerce

The Bus Regulatory Reform Act 1982 requires limits of financial responsibility according to vehicle seating capacity, it is the **Motor Carrier's** obligation to obtain the required limits of financial responsibility. **The schedule of limits shown on the reverse side does not provide coverage.** The limits shown in the schedule are for information purposes only.

| <b>Vehicle seating capacity</b>                                   | <b>Minimum limits</b> |
|---|-----------------------|
| (1) Any vehicle with a seating capacity of 16 passengers or more. | \$5,000,000           |
| (2) Any vehicle with a seating capacity of 15 passengers or less. | \$1,500,000           |

# Title 49 CFR, Part 390

## Federal Motor Carrier Safety Regulations; General

### General Applicability

The Federal Motor Carrier Safety Regulations (FMCSR) applies to all employers, employees and commercial motor vehicles transporting property or passengers in interstate/intrastate commerce.

### Commercial Motor Vehicle

Any self propelled or towed vehicle used on public highways in interstate/intrastate commerce to transport passengers or property under one of the following conditions:

- Vehicles has gross vehicle weight rating (GVWR) or gross combination weight rating of 10,001 or more pounds;
- Vehicle is designed to transport more than 15 passengers, including the driver;
- Designed or used to transport more than 8 passengers (including the driver) for compensation (interstate); or
- Vehicle is used in the transportation of hazardous materials in a quantity requiring placarding under the Hazardous Materials Transportation Act (HMTA) Regulations.

### Exceptions to General Applicability

Transportation provided by Federal, State, Local or Congressionally approved interstate agencies is exempt from the FMCSR's. Occasional non-commercial transport, school buses, ambulance services, a hearse and fire and rescue vehicle operations are also exempt.

An occurrence involving a commercial motor vehicle operating on a public road that results in at least one of the following:

### What is an accident?

- A fatality;
- Bodily injury to a person who, as a result of the injury, immediately receives medical treatment away from the scene of the accident;
- Disabling damage to one or more motor vehicles, requiring the vehicle(s) to be towed or otherwise transported from the scene by a tow truck or other vehicle.

For a period of three years after an accident occurs, motor carriers are required to maintain an accident register containing the following information;

### Accident Register

- Time and place of accident;
- Driver's name
- Number of injuries and fatalities
- Hazardous materials released if any, (other than fuel)

**Vehicle  
Identification**

Motor Carriers are also required to maintain copies of all accident reports required by state or other governmental entities or insurers for a period of one year after an accident occurs.

Every commercial motor vehicle operated by a motor carrier in interstate/intrastate commerce must be marked on both sides of the vehicle with the following:

- Name of motor carrier, or trade name
- The motor carrier's identification number preceded by USDOT for interstate carriers and followed by UT for intrastate carriers.

**Update MCS-150**

**Set up an account to make changes and monitor your company information at:  
<https://portal.fmcsa.dot.gov>**

**Note:** Each motor carrier that conducts operations in interstate/intrastate commerce must file a motor Carrier Identification Report, Form MCS-150, every 24 months. This can be accomplished at:

[https://li-public.fmcsa.dot.gov/LIVIEW/pkg\\_registration.prc\\_option\\_decision](https://li-public.fmcsa.dot.gov/LIVIEW/pkg_registration.prc_option_decision)

**Where can I get the MCS-150 form?**

You may get the form from the FMCSA's website at:

<http://www.fmcsa.dot.gov/forms/print/r-l-forms.htm>

(Refer to Part 390.19 for renewal schedule)



# Title 49 CFR, Part 391

## Qualification of Drivers

|  |   |
|--|---|
| <b>Requirements</b>                        | <p>A driver operating in interstate/intrastate commerce must:</p> <ul style="list-style-type: none"><li>• Be physically qualified under 49 CFR 391.41;</li><li>• Be 18 years old for intrastate transportation,</li><li>• Be 21 years old for interstate transportation, or when hauling placarded amounts of hazardous materials;</li><li>• Read and speak the English language sufficiently to converse with the general public, to understand highway traffic signs and signals in the English language, to respond to official inquiries, and to make entries on reports and records</li><li>• Have a driver's license that is valid for the type of vehicle driven;</li><li>• Be able to drive the vehicle safely</li><li>• Know how to properly load and secure cargo;</li><li>• Not be disqualified from driving a commercial motor vehicle.</li></ul> |
| <b>Medical Requirements</b>                | <p>A driver is required to have in possession, a current and valid medical certificate showing that he or she is physically qualified to drive a commercial motor vehicle. Details for medical examinations are found in 49 CFR, 391.43. U.S.DOT medical certificate forms are available from a physician or private sources.</p>   |
| <b>Certificate Renewal</b>                 | <p>Non-CDL driver's medical certificates must be renewed every two years. Some medical conditions may require more frequent recertification.</p>  |
| <b>CDL Medical</b>                         | <p>CDL drivers must maintain compliance with Part 383.71.</p>   |
| <b>Skills Performance Evaluation (SPE)</b> | <p>Under certain circumstances, a driver may be granted a Skills Performance Evaluation (SPE) from the following physical qualification requirements; vision, insulin-dependent diabetes, deaf and hard of hearing, and limb impairment. An application requesting an SPE for intrastate drivers must be submitted to the Utah Driver's License Division. A request for an SPE for interstate drivers must be submitted to the Division Administrator, FMCSA. <b><u>The medical examiner's certificate and the SPE document must be carried in the commercial vehicle at all times while being operated.</u></b></p>  |
| <b>Driver Qualification File (DQ)</b>      | <p><b>Part 391.51 - A carrier must maintain a driver qualification file for each of its drivers. The file is to be kept at the carrier's principal place of business for as long as the driver is employed by the carrier and for three years after the driver leaves the carrier's employ.</b></p>   |

**The Pre-Employment Screening Program (PSP)**

**NOTICE:** 49 CFR Part 391.23 requires prospective employers to, at a minimum, investigate a driver's employment information, crash record, and alcohol and controlled substances history from all employers the driver worked for within the previous 3 years.

The PSP is a screening tool that assists motor carriers in investigating crash history and roadside safety performance of prospective drivers. The PSP allows motor carriers to purchase 5 years of crash data and 3 years of roadside inspection data from the Federal Motor Carrier Safety Administration's (FMCSA) Motor Carrier Management Information System (MCMIS). Records are available 24 hours a day via Web request. Motor carriers should visit the following website for more information: <http://www.psp.fmcsa.dot.gov/Pages/default.aspx>

## DRIVER QUALIFICATION FILE CHECKLIST

Every motor carrier must have a driver qualification (DQ) file for each regularly employed driver. The file must include the following:

- A. \_\_\_ Driver's Application for Employment (49 CFR 391.21). A person will not be allowed to drive a commercial motor vehicle unless he/she has completed and signed an application for employment.
- B. \_\_\_ Inquiry to Previous Employers -3- year (49 CFR 391.23(a)(2) & (c), and 391.53). This investigation must be made within 30 days of the date that his/her employment begins. Investigations shall include information concerning out-of-service violations, misuse of controlled substance or alcohol and accident history.
- C. \_\_\_ Inquiry to State Agencies – 3 years (49 CFR 391.23(a) (1) & (b) – (new hire MVR). The drivers driving record (MVR) for the preceding three years.
- D. \_\_\_ Driver's Road Examination and Certificate or copy of valid CDL (49 CFR 391.31). A copy of the license or certificate which the motor carrier accepted as equivalent to the driver's road test pursuant to Section 391.33.
- E. \_\_\_ Medical Examiner's Certificate (49CFR 391.43). A non CDL driver must be issued a Medical Examiner's Certificate, which must be carried at all times and be renewed every two years or as required by the medical examiner.
- F. \_\_\_ A CDLIS (MVR) must be obtain by the motor carrier each time the driver gets a new medical or renews their medical certificate. The report must be obtained within 15 days of the driver submitting the medical certificate to the State.
- G. \_\_\_ CDL drivers are required to be examined by a medical examiner listed on the National Registry of Certified Medical Examiners (NRCME). The carrier is required to place a note in the driver's qualification file verifying that the medical examiner is listed on the registry as required by 391.23(m).
- H. \_\_\_ Annual MVR and Review of Driving Record (49 CFR 391.25) **and** Annual Driver's List of Violations and Certification (49 CFR 391.27). At least once every 12 months a motor carrier must obtain and review the driving record of each driver.

# Employment Application

\_\_\_\_\_ Company Name

\_\_\_\_\_ Address

\_\_\_\_\_ City, State, ZIP

\_\_\_\_\_ Phone number

Position Applying for: \_\_\_\_\_ Date of Application: \_\_\_\_\_

Name: \_\_\_\_\_ Social Security No.: \_\_\_\_\_  
Last First Middle

Current Address: \_\_\_\_\_  
Street City  
 Phone: \_\_\_\_\_ Birth Date \_\_\_\_\_

State Zip Code  
 Previous  
 Addresses: \_\_\_\_\_ Dates: From \_\_\_\_\_  
 (3 Years) Street City State & Zip Code To \_\_\_\_\_

\_\_\_\_\_ Dates: From \_\_\_\_\_  
Street City State & Zip Code To \_\_\_\_\_

\_\_\_\_\_ Dates: From \_\_\_\_\_  
Street City State & Zip Code To \_\_\_\_\_

Use backside of sheet for additional addresses

## **Driver's License information: List all licenses held within the previous 3 years**

License number \_\_\_\_\_ Class \_\_\_\_\_ State \_\_\_\_\_ Exp. Date \_\_\_\_\_

License number \_\_\_\_\_ Class \_\_\_\_\_ State \_\_\_\_\_ Exp. Date \_\_\_\_\_

License number \_\_\_\_\_ Class \_\_\_\_\_ State \_\_\_\_\_ Exp. Date \_\_\_\_\_

Have you ever had any driver's license denied, suspended, revoked, or canceled by any state agency?  
 YES  NO  If yes, give state of issuance and explanation of the circumstances \_\_\_\_\_

**Use backside of sheet if additional space is needed**

## **Driving Experience**

| Types Of Equipment<br><small>(Truck, tractor/trailer, tank, etc.)</small> | Dates |      | Approx. mileage driven<br><small>(total)</small> |
|---|-------|------|--|
|   | To    | From |  |
|   |       |      |  |
|   |       |      |  |
|   |       |      |  |

**List all traffic violations convictions for the previous 3 years (write NONE, if none)**

| Date | Location | Violation | Commercial Vehicle                                       |
|------|----------|-----------|--|
|      |          |           | Yes <input type="checkbox"/> No <input type="checkbox"/> |
|      |          |           | Yes <input type="checkbox"/> No <input type="checkbox"/> |
|      |          |           | Yes <input type="checkbox"/> No <input type="checkbox"/> |
|      |          |           | Yes <input type="checkbox"/> No <input type="checkbox"/> |
|      |          |           | Yes <input type="checkbox"/> No <input type="checkbox"/> |
|      |          |           | Yes <input type="checkbox"/> No <input type="checkbox"/> |
|      |          |           | Yes <input type="checkbox"/> No <input type="checkbox"/> |
|      |          |           | Yes <input type="checkbox"/> No <input type="checkbox"/> |

**List all accidents for the previous 3 years (write NONE, if none)**

| Date | Nature of Accident | Fatalities | Injuries |
|------|--------------------|------------|----------|
|      |                    |            |          |
|      |                    |            |          |
|      |                    |            |          |
|      |                    |            |          |
|      |                    |            |          |

**Employment History**

List all employment for the previous 3 years, all driving jobs for the previous 10 years, including any gaps between employers.

|   |                      |     |  |
|---|----------------------|-----|--|
| Employer:   | Period of Employment |     | Supervisor:  |
| Address:  | From:                | To: |  |
| City, State, ZIP  |                      |     | Telephone:   |
| Title and Duties:   |                      |     |  |
| Reason for Leaving:   |                      |     |  |
| Were you subject to the Federal Motor Carrier Safety Regulations during this period?            |                      |     | YES <input type="checkbox"/> NO <input type="checkbox"/> |
| Were you subject to 49 CFR part 40 controlled substance and alcohol testing during this period? |                      |     | YES <input type="checkbox"/> NO <input type="checkbox"/> |

|   |                      |     |  |
|---|----------------------|-----|--|
| Employer:   | Period of Employment |     | Supervisor:  |
| Address:  | From:                | To: |  |
| City, State, ZIP  |                      |     | Telephone:   |
| Title and Duties:   |                      |     |  |
| Reason for Leaving:   |                      |     |  |
| Were you subject to the Federal Motor Carrier Safety Regulations during this period?            |                      |     | YES <input type="checkbox"/> NO <input type="checkbox"/> |
| Were you subject to 49 CFR part 40 controlled substance and alcohol testing during this period? |                      |     | YES <input type="checkbox"/> NO <input type="checkbox"/> |

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|   |                      |     |  |
|---|----------------------|-----|--|
| Employer:   | Period of Employment |     | Supervisor:  |
| Address:  | From:                | To: |  |
| City, State, ZIP  |                      |     | Telephone:   |
| Title and Duties:   |                      |     |  |
| Reason for Leaving:   |                      |     |  |
| Were you subject to the Federal Motor Carrier Safety Regulations during this period?            |                      |     | YES <input type="checkbox"/> NO <input type="checkbox"/> |
| Were you subject to 49 CFR part 40 controlled substance and alcohol testing during this period? |                      |     | YES <input type="checkbox"/> NO <input type="checkbox"/> |

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|   |                      |     |  |
|---|----------------------|-----|--|
| Employer:   | Period of Employment |     | Supervisor:  |
| Address:  | From:                | To: |  |
| City, State, ZIP  |                      |     | Telephone:   |
| Title and Duties:   |                      |     |  |
| Reason for Leaving:   |                      |     |  |
| Were you subject to the Federal Motor Carrier Safety Regulations during this period?            |                      |     | YES <input type="checkbox"/> NO <input type="checkbox"/> |
| Were you subject to 49 CFR part 40 controlled substance and alcohol testing during this period? |                      |     | YES <input type="checkbox"/> NO <input type="checkbox"/> |

|   |                      |     |  |
|---|----------------------|-----|--|
| Employer:   | Period of Employment |     | Supervisor:  |
| Address:  | From:                | To: | Telephone:   |
| City, State, ZIP  |                      |     |  |
| Title and Duties:   |                      |     |  |
| Reason for Leaving:   |                      |     |  |
| Were you subject to the Federal Motor Carrier Safety Regulations during this period?            |                      |     | YES <input type="checkbox"/> NO <input type="checkbox"/> |
| Were you subject to 49 CFR part 40 controlled substance and alcohol testing during this period? |                      |     | YES <input type="checkbox"/> NO <input type="checkbox"/> |

|   |                      |     |  |
|---|----------------------|-----|--|
| Employer:   | Period of Employment |     | Supervisor:  |
| Address:  | From:                | To: | Telephone:   |
| City, State, ZIP  |                      |     |  |
| Title and Duties:   |                      |     |  |
| Reason for Leaving:   |                      |     |  |
| Were you subject to the Federal Motor Carrier Safety Regulations during this period?            |                      |     | YES <input type="checkbox"/> NO <input type="checkbox"/> |
| Were you subject to 49 CFR part 40 controlled substance and alcohol testing during this period? |                      |     | YES <input type="checkbox"/> NO <input type="checkbox"/> |

(Use additional sheet if needed)

For Driver applicants of commercial motor vehicles that require a Commercial Driver's License (CDL) the applicant must disclose their controlled substance and alcohol status per the requirements of 49 CFR part 40.25(j).

As a perspective driver employee, you will have the right to review information provided by previous employers. You have the right to have errors in the information corrected by the previous employer(s) and for that previous employer(s) to re-send the corrected information to the prospective employer; the right to have a rebuttal statement attached to the alleged erroneous information, if the previous employer and the driver cannot agree on the accuracy of the information.

Driver employees who have previous Department of Transportation regulated employment history in the preceding three years, and wish to review previous employer provided investigative information, must submit a written request to the prospective employer, which may be done at any time, including when applying or as late as thirty (30) days after being employed or being notified of denial of employment. The prospective employer must provide this information to the applicant within five (5) business days of receiving the written request. If the prospective employer has not yet received the requested information from the previous employer(s), then the five (5) business day deadline will begin when the perspective employer receives the requested safety performance history information. If the driver has not arranged to pick up or receive the requested records within thirty (30) days of the prospective employer making them available, the prospective motor carrier may consider the driver to have waived their request to review the records.

### Certification

**"I certify that this application was completed by me, and that all entries on it and information in it are true and complete to the best of my knowledge."**

\_\_\_\_\_  
*Applicant's Signature*

\_\_\_\_\_  
*Date Signed*

|  |  |
|--|--|
| <b>PART 1:</b>   | <b>TO BE COMPLETED BY PROSPECTIVE EMPLOYEE</b> |
| <p>I, _____ - _____ - _____<br/>         FIRST M.I. LAST SOCIAL SECURITY NUMBER</p> <p>Do hereby authorize my:</p>   |  |
| <p><b>Previous Employer:</b> _____ Phone: _____<br/>         Address: _____ Fax: _____<br/>         City, State, Zip: _____ E-mail: _____</p>  |  |
| <p>To release all information regarding my services, character, and conduct while in your employ, and you are released from any and all liability, which may result from furnishing such information to the prospective employer listed below:</p> |  |
| <p><b>Perspective Employer:</b> _____ Phone: _____<br/>         Address: _____ Fax: _____<br/>         City, State, Zip: _____ E-mail: _____</p>   |  |
| <p><b>In compliance with Part 391.23(h), release of this information must be made in a written form that ensures confidentiality, such as fax, e-mail or letter.</b></p>   |  |
| _____<br>APPLICANT'S SIGNATURE   | _____<br>DATE                                  |

|   |
|---|
| <b>Previous Employer Driver Inquiry</b> |
|---|

|  |   |
|--|---|
| <b>PART 2:</b>   | <b>TO BE COMPLETED BY PREVIOUS EMPLOYER</b> |
| <p>1. The applicant named above was employed by us from (m/y) _____ to (m/y) _____</p> <p>2. What kind(s) of work did the applicant do? _____</p> <p>3. Did the applicant drive a motor vehicle for your? <input type="checkbox"/> Straight Truck <input type="checkbox"/> Tractor Semi-trailer <input type="checkbox"/> Bus<br/> <input type="checkbox"/> Passenger Vehicle <input type="checkbox"/> Other</p> <p>4. Was the applicant a safe and efficient driver? _____</p> <p>5. Was the applicant involved in any accidents? If so, include dates (d/m/y), and brief explanation:<br/>         _____<br/>         _____</p> <p>6. Was the driver ever placed out-of-service for hours of service violations? <input type="checkbox"/> Yes <input type="checkbox"/> No<br/>         Explanation: _____<br/>         _____</p> <p>7. Did the applicant misuse alcohol or use a controlled substance? _____</p> <p>8. Was the applicant's general conduct satisfactory? _____</p> <p>9. Reason for leaving your employ: <input type="checkbox"/> Discharged <input type="checkbox"/> Laid Off <input type="checkbox"/> Resigned</p> <p>10. Remarks: _____<br/>         _____</p> |   |
| <p>Print Name: _____ Position: _____</p> <p>Signature: _____ Date: _____</p>   |   |

**The Federal Motor Carrier Safety Regulations require all previous employers of this applicant to respond to this request for information within 30 days. Failure to comply with this request is in violation of 49 CFR Part 391.23.**

**ANNUAL VIOLATION AND REVIEW RECORD**

Driver's Name:

(PLEASE PRINT OR TYPE)

**I. CERTIFICATION OF VIOLATIONS (Part 391.27)**

I certify that the following is a true and complete list of traffic violations (other than parking violations) for which I have been convicted or forfeited bond or collateral during the past 12 months.

| Date | Offense | Location | Type Vehicle Operated |
|------|---------|----------|-----------------------|
|      |         |          |                       |
|      |         |          |                       |
|      |         |          |                       |
|      |         |          |                       |
|      |         |          |                       |
|      |         |          |                       |

If no violations are listed above, I certify that I have not been convicted or forfeited bond or collateral on account of any violation required to be listed during the past 12 months.

(DATE OF CERTIFICATION)

(DRIVER'S SIGNATURE)

(MOTOR CARRIER'S NAME)

(MOTOR CARRIER'S ADDRESS)

(REVIEWED BY SIGNATURE)

(TITLE)

**II. ANNUAL REVIEW OF DRIVING RECORD (Part 391.25)**

In accordance with Section 391.25, Motor Carrier Safety Regulations, all information pertinent to the above driver's safety of operations, including the list of violations furnished by him in accordance with Section 391.27, has been reviewed for the past 12 months. I considered any evidence that the driver has violated applicable provisions of the FMCSR's and the Hazardous Materials Regulations. I considered the driver's accident record and any evidence that he/she has violated laws governing the operations of motor vehicles and gave great weight to violations such as: speeding, reckless driving, and operations while under the influence of alcohol or drugs, that indicate that the driver has exhibited a disregard for the safety of the public. Having done the above, I find that

- The driver meets the minimum requirements for safe driving, or
- The driver is disqualified to drive a commercial motor vehicle pursuant to Part 391.15

(MOTOR CARRIER'S NAME)

(MOTOR CARRIER'S ADDRESS)

(REVIEWED BY SIGNATURE)

(TITLE)

(DATE)

## DRIVER'S ROAD TEST EXAMINATION

Driver's Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Driver's Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

The road test shall be given by the motor carrier or a person designated by it. However, a driver who is a motor carrier must be given the test by another person. The test shall be given by a person who is competent to evaluate and determine whether the person who takes the test has demonstrated that he or she is capable of operating the vehicle and associated equipment that the motor carrier intends to assign.

### Rating of Experience

- \_\_\_\_\_ The pre-trip inspection. (As required by Sec. 392.7)
- \_\_\_\_\_ Coupling and uncoupling of combination units, if the equipment he or she may drive includes combination units.
- \_\_\_\_\_ Placing the equipment in operation.
- \_\_\_\_\_ Use of vehicle's controls and emergency equipment.
- \_\_\_\_\_ Operating the vehicle in traffic and while passing other vehicles.
- \_\_\_\_\_ Turning the vehicle.
- \_\_\_\_\_ Braking, and slowing the vehicle by means other than braking.
- \_\_\_\_\_ Backing and parking the vehicle.
- \_\_\_\_\_ Other, Explain: \_\_\_\_\_  
\_\_\_\_\_

Type of equipment used in giving test: \_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_ Date

\_\_\_\_\_ Examiner's Signature

If the road test is successfully completed, the person who gave it shall complete a certificate of driver's road test.

Remarks \_\_\_\_\_  
\_\_\_\_\_

## CERTIFICATE OF DRIVER'S ROAD TEST

**Instructions:** If the road test is successfully completed, the person who gave it shall complete a certificate of the driver's road test. The original or copy of the certificate shall be retained in the employing motor carrier's driver qualification file of the person examined and a copy given to the person who was examined. (49 CFR 391.33(e)(f)(g))

|  |
|--|
| <b>CERTIFICATION OF ROAD TEST</b>  |
| Driver's Name _____  |
| Social Security Number _____   |
| Operator's or Chauffeur's License Number _____   |
| State _____  |
| Type of Power Unit _____   |
| Type of Trailer(s) _____   |
| If passenger carrier, type of bus _____  |
| <p>This is to certify that the above named driver was given a road test under my supervision on _____, 20____, consisting of approximately _____miles of driving.</p> <p>It is my considered opinion that this driver possesses sufficient driving skills to operate safely the type of commercial motor vehicle listed above.</p> |
| _____<br>(Signature of Examiner)   |
| _____<br>(Title)   |
| _____<br>(Organization and Address of Examiner)  |

# Title 49 CFR, Part 392

## Driving of Commercial Motor Vehicles

|   |   |
|---|---|
| <b>Illness or Fatigue</b>                     | No driver is permitted to operate a motor vehicle when his/her ability and/or alertness is impaired by fatigue, illness, or any other cause that makes it unsafe to begin (or continue) to drive the vehicle.   |
| <b>Drugs</b>                                  | No driver may be on duty and possess, be under the influence of, or use: <ul style="list-style-type: none"><li>• Any schedule I drug or other substance listed in Appendix D.</li><li>• Any amphetamine or formulation of any amphetamine (including pep pills and bennies)</li><li>• Narcotics or derivatives</li><li>• Any other substance that makes driving unsafe</li></ul>  |
| <b>Alcohol</b>                                | A driver is forbidden to consume or be under the influences of alcohol within four hours of going on duty, while on duty, or while driving. A driver is forbidden to possess an alcoholic beverage while on duty, unless it is a manifested part of the shipment.   |
| <b>Safe Loading</b>                           | No one may drive or require anyone to drive a commercial motor vehicle unless the cargo is properly loaded and secured.   |
| <b>Railroad Crossing/Stopping</b>             | Motor vehicles transporting hazardous materials and most buses transporting passengers are forbidden to cross railroad tracks without first stopping and looking both ways. Additionally, the driver must not shift gears while crossing the tracks.  |
| <b>Seat Belts</b>                             | A driver must not drive before correctly restraining him/herself, if the vehicle is equipped with seat belt assemblies.   |
| <b>Emergency Signals for Stopped Vehicles</b> | A vehicle stopped upon a highway must activate the vehicle's hazard warning flashers at once. The driver must leave the flashers on until warning devices are activated. The flashers must again be used while the warning devices are being picked up and before the vehicle moves on.   |
| <b>Placement of warning devices</b>           | The warning devices must be placed as follows (except where special rules apply) <ul style="list-style-type: none"><li>• One warning device must be placed on the traffic side of the vehicle, within ten feet, in the direction of approaching traffic.</li><li>• A second device must be placed facing approaching traffic approximately 100 feet away in the center of the lane or shoulder where the vehicle is stopped.</li><li>• The third device must be placed about 100 feet away from the stopped vehicle, in the direction away from approaching traffic</li></ul> |

**Radar detectors shall not be used by a driver in a commercial vehicle:**

**Prohibition against texting:**

**Hands free cell phone:**

- A driver shall not operate any commercial motor vehicle that is equipped with a radar detector.
- Motor carriers shall not require or permit a driver to violate the radar detector prohibition.
  
- No driver shall engage in texting while driving.
- No motor carrier shall allow or require its drivers to engage in texting while driving.
  
- No driver shall use a hand-held mobile telephone while driving a CMV.
- No motor carrier shall allow or require its drivers to use a hand-held mobile telephone while driving a CMV.

# Title 49 CFR, Part 395

## Property Carrying Hours-of-Service

**Definitions:**

“On duty time” is all time a driver spends performing work, or being ready to work, until being relieved by the carrier of all responsibility. “On duty” time also includes any compensated work performed by the driver for a non-motor carrier entity.

On duty time does not include time spent resting in or on a parked vehicle; any time spent resting in a sleeper berth; or up to 2 hours riding in the passenger seat of a property-carrying vehicle moving on the highway immediately before or after 8 consecutive hours in sleeper-berth.

“Driving time” is all time spent at the driving controls of a commercial motor vehicle in operation.

“Off duty” means the driver has been relieved of all responsibilities and is not ready for work.

“Time record” is a time card or other record showing the time the driver reports for duty each day, total hours the driver is on duty each day, time the driver is released from duty each day, and total time for preceding days if the driver is used for first time or intermittently.

**A motor carrier may not permit or require a driver to drive after:**

11 hours driving time following 10 consecutive hours off duty; the 14<sup>th</sup> hour of coming on duty following 10 consecutive hours off duty; being on duty 60 hours in a 7 day period; being on duty 70 hours in any period of 8 consecutive days if the carrier operates every day of the week. Any 7 or 8-day period may restart after 34 consecutive hours off duty.

Time spent by a driver in a compensated non-motor carrier position is considered on duty time and must be included in the 14 and 60/70 hour rules. (Example: a part time position at a retail store.)

Calculation of the 14-hour limit includes all time except any off duty time of at least 10 consecutive hours or longer or any sleeper-berth time of at least 8 consecutive hours or longer.

**Meaningful system:**

A meaningful system must be in place to track and verify accuracy of driver’s records of duty status/time records. This shall include records with dates, times, locations and vehicle driven.

**What must be on the log?**

A record of duty status must:

- Be on specific grid or automatic on-board recorder;
- Be current to the last change of duty status;
- Have legible entries in driver's own handwriting;
- Show month, day, and year with total miles driven and
- Total hours in each duty status for each 24 hours of record;
- Show vehicle number, or state and license number of each vehicle operated during that 24-hour period;
- Have carrier(s) name, for whom work was performed, and beginning and finishing times for each carrier.

**What does the driver need to have with them?**

A driver is required to have in possession a record of duty status for the previous 7 consecutive days unless an exception from regulation is granted (395.1(e)).

**Retention of logs:**

Record of duty status, supporting documents and time cards must be maintained and retained by the carrier for a period of six months.

**Automatic on-board recording devices:**

Automatic on-board recording devices must provide immediate status verification of time and sequence of duty, status changes, current hours of service and previous 7-day status. Electronic devices must follow the rules under Section 395.15.

**Short haul operations:**

Drivers are exempt from keeping logbooks if all of the following requirements are met:

- Operates within 100 air-mile radius (115.08 miles) of the normal work reporting location;
- Returns to the same work reporting location and is relieved of duties within 12 hours;
- Does not exceed 11 hours driving;
- Ten consecutive hours off duty separate each 12 hours on duty; and
- Carrier maintains for a period of six months, true and accurate time records showing; start, end and total hours worked. Total time for preceding seven days if driver is used for the first time or intermittently.

A driver may extend the 14 hour rule to 16 hours once in every 7/8 day period, provided he has returned to his normal work reporting location and is released from duty at that location for the prior five duty tours and keeps a log for that day.

**150 air-mile provision for non-CDL drivers:**

A Non-CDL driver is exempt from the requirements of 395.3(a)(2) and 395.8 and ineligible to use the provisions of 395.1(e)(1), (g), and (o) if:

- Operates within 150 air-mile radius (172.06 miles) of the normal work reporting location;
- The driver returns to the normal work reporting location at the end of each duty tour; and
- The driver does not exceed 11 hours maximum driving time following 10 consecutive hours off duty; and
- Does not drive after the 14<sup>th</sup> hour after coming on duty 5 days of any period of 7 consecutive days; and
- Does not drive after the 16<sup>th</sup> hour after coming on duty on 2 days of any period of 7 consecutive days; and
- Carrier maintains for a period of six months, true and accurate time records showing; start and ending times, total hours worked, total time for preceding seven days if driver is used for the first time or intermittently.

**Over hours and/or false logs:**

Drivers found driving in excess of maximum hours or failing to keep a proper record of duty status for current day and 7 prior consecutive days shall be put out of service. A driver that is out of service (OOS) shall not be required or permitted to drive and a driver may not drive a commercial motor vehicle until the driver has hours available.

The driver may meet the rest requirements using one of the four options described in the table below:

**Rest period options:**

|          |   |   |
|----------|---|---|
| Option 1 | Off Duty Time<br>395.1(g)(1)(i)(A)(1)                                   | At least 10 <u>consecutive</u> and <u>uninterrupted</u> hours off duty.   |
| Option 2 | Continuous Sleeper Berth Provision<br>395.1(g)(1)(i)(A)(1)              | At least 10 <u>consecutive</u> and <u>uninterrupted</u> hours in the sleeper berth.   |
| Option 3 | Continuous Off Duty and sleeper Berth Provision<br>395.1(g)(1)(i)(A)(3) | At least 10 consecutive hours sleeper berth and off duty time combined and <u>uninterrupted</u> .   |
| Option 4 | Sleeper Berth Provision<br>395.1(g)(1)(i)(A)(4) and<br>395.1 (g)(1)(ii) | The equivalent of at least 10 consecutive hours off duty (equivalent means at least 8 hours but less than 10 consecutive hours in a sleeper berth <u>and</u> a separate period of at least 2 but less than 10 consecutive hours either in the sleeper berth or off duty, or any combination of both). |

**34-hour restart:**

The 60 hours in 7 days or 70 hours in 8 days reset with any period of 34 consecutive hours off, sleeper or combination of both.

**30-minute rest break:**

Drivers cannot drive if more than 8 hours have passed since their last off-duty or sleeper-berth period of at least 30 minutes.

**Agricultural Provisions:**

The provisions of Part 395 do not apply to drivers transporting agricultural commodities or farm supplies for agricultural purposes if such transportation is limited to an area within 150 air-mile radius from the source of the commodities or the distribution point for the farm supplies.

**Oil field exemptions,**

1. In the instance of driver of a commercial motor vehicle used exclusively in the transportation of oilfield equipment, including the stringing and picking up of pipe used in pipelines, and servicing of the field operation of the natural gas and oil industry, any period of 8 consecutive days may end with the beginning of any off-duty period of 24 or more successive hours.
2. In the case of specially trained drivers of commercial motor vehicles which are specially constructed to service oil wells, on-duty time shall not include waiting time at a natural gas or oil well site; provided that all such time shall be fully and accurately accounted for in records to be maintained by the motor carrier. Such records shall be made available upon request of the Federal Motor Carrier Safety Administration.
3. "Waiting time" for certain drivers at oil fields must be shown on logbook or electronic equivalent as off duty and identified by annotations in "remarks" or a separate line added to the grid.

**Note: Water trucks, vacuum trucks and those vehicles which can be utilized in other areas of transportation are not allowed to use the exception relating to waiting time at the well site.**

**Utility service vehicles:**

The provisions of Part 395 do not apply to a driver of a utility service vehicle as defined in 395.2:

1. Used in the furtherance of repairing, maintaining, or operating any structures or any other physical facilities necessary for the delivery of public utility services, including the furnishing of electric, gas, water, sanitary sewer, telephone and television cable or community antenna service;
2. While engaged in any activity necessarily related to the ultimate delivery of such public utility services to consumers, including travel or movement to, from, upon, or between activity sites (including occasional travel or movement outside the service area necessitated by any utility emergency as determined by the utility provider); and
3. Except for an occasional emergency use, operated primarily within the service area of a utility's subscribers or consumers, without regard to whether the vehicle is owned, leased, or rented by the utility.

# Time Card – Log Book Combination (Part 395)

**Company Name:** \_\_\_\_\_ **City:** \_\_\_\_\_  
**Driver:** \_\_\_\_\_ **Date:** \_\_\_\_\_  
**Job Name:** \_\_\_\_\_ **Total Miles:** \_\_\_\_\_ **Fuel:** \_\_\_\_\_  
**Truck #** \_\_\_\_\_ **Pup #** \_\_\_\_\_ **Lunch:** \_\_\_\_\_  
**Start Time:** \_\_\_\_\_ **End Time:** \_\_\_\_\_ **Total Hours:** \_\_\_\_\_

| Ticket #     | Time Loaded | Weight/Time |
|--------------|-------------|-------------|
| 1            |             |             |
| 2            |             |             |
| 3            |             |             |
| 4            |             |             |
| 5            |             |             |
| 6            |             |             |
| 7            |             |             |
| 8            |             |             |
| 9            |             |             |
| 10           |             |             |
| 11           |             |             |
| 12           |             |             |
| 13           |             |             |
| 14           |             |             |
| 15           |             |             |
| <b>Total</b> |             |             |

### DRIVERS INSPECTION REPORT

Oil \_\_\_\_\_ Antifreeze \_\_\_\_\_ Mileage \_\_\_\_\_

#### Power Unit

- |   |  |
|---|--|
| <input type="checkbox"/> Service brakes including trailer connections | <input type="checkbox"/> Steering mechanism  |
| <input type="checkbox"/> Parking (hand) brake                         | <input type="checkbox"/> Tires               |
| <input type="checkbox"/> Lighting devices & reflectors                | <input type="checkbox"/> Windshield wipers   |
| <input type="checkbox"/> Horn   | <input type="checkbox"/> Coupling devices    |
| <input type="checkbox"/> Rear vision mirrors                          | <input type="checkbox"/> Emergency equipment |
|   | <input type="checkbox"/> Wheel and rims      |

#### Towed Unit(s)

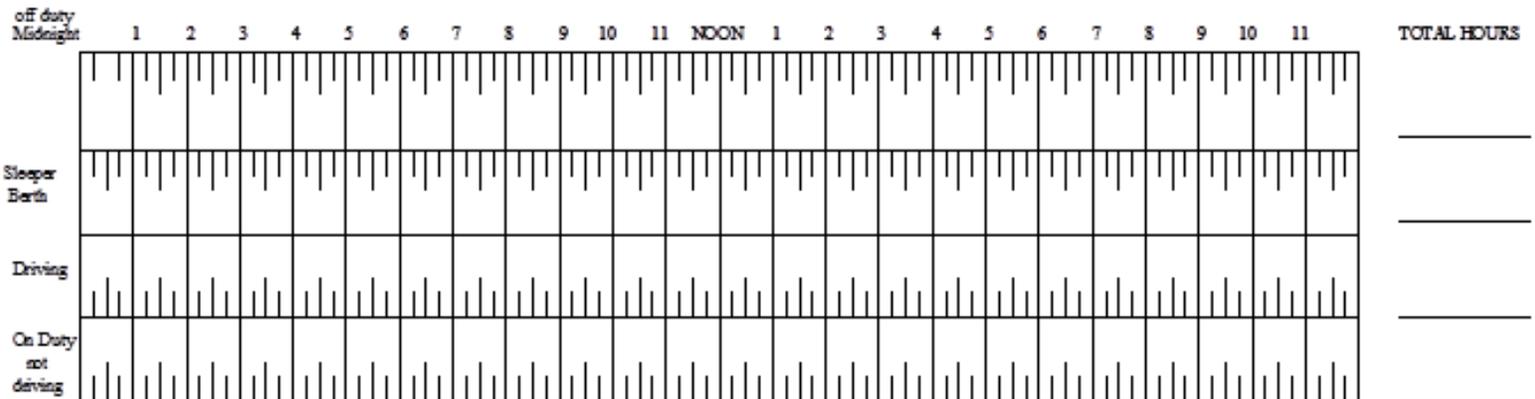
- |   |   |
|---|---|
| <input type="checkbox"/> Service brakes including connections | <input type="checkbox"/> Tires            |
| <input type="checkbox"/> Brakes                               | <input type="checkbox"/> Coupling devices |
| <input type="checkbox"/> Lighting devices & reflectors        | <input type="checkbox"/> Cargo securement |
| <input type="checkbox"/> Wheels and rims                      |   |

Reporting Driver: \_\_\_\_\_

Maintenance Action:  Repairs Made  No Repairs Needed

Mechanics Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Reviewing Driver: \_\_\_\_\_ Date: \_\_\_\_\_



When the exemption found in 395.1(e) is not met the above graph must be used. Example: when driver/operator exceeds the 12-hour exemption or travels beyond a 100-mile radius of home operation.

**DRIVER'S DAILY LOG**  
 One calendar day - 24 hours

ORIGINAL - File each day at home terminal  
 DUPLICATE - Driver retains possession for one month

(Month) \_\_\_\_\_ (Day) \_\_\_\_\_ (Year) \_\_\_\_\_ (Total miles driving today) \_\_\_\_\_

\_\_\_\_\_  
 (Vehicle numbers - (Show each unit))

I certify these entries are true and correct:

\_\_\_\_\_  
 (Driver's signature in full)

\_\_\_\_\_  
 (Name of Carrier or Carriers)

\_\_\_\_\_  
 (Name of co-driver)

\_\_\_\_\_  
 (Main Office Address)

|                          | MID-NIGHT | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 | 11 | NOON | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 | 11 | TOTAL HOURS |
|--------------------------|-----------|---|---|---|---|---|---|---|---|---|----|----|------|---|---|---|---|---|---|---|---|---|----|----|-------------|
| 1. OFF DUTY              |           |   |   |   |   |   |   |   |   |   |    |    |      |   |   |   |   |   |   |   |   |   |    |    |             |
| 2. SLEEPER BERTH         |           |   |   |   |   |   |   |   |   |   |    |    |      |   |   |   |   |   |   |   |   |   |    |    |             |
| 3. DRIVING               |           |   |   |   |   |   |   |   |   |   |    |    |      |   |   |   |   |   |   |   |   |   |    |    |             |
| 4. ON DUTY (Not Driving) |           |   |   |   |   |   |   |   |   |   |    |    |      |   |   |   |   |   |   |   |   |   |    |    |             |
| REMARKS                  |           |   |   |   |   |   |   |   |   |   |    |    |      |   |   |   |   |   |   |   |   |   |    |    |             |

Pro or Shipping No. \_\_\_\_\_

## DRIVERS TIME RECORD FOR A PROPERTY CARRYING COMMERCIAL DRIVER

Driver's Name (print) \_\_\_\_\_ Employee No. \_\_\_\_\_ Month \_\_\_\_\_ Year \_\_\_\_\_

**Driver's may prepare this report instead of the "drivers daily log" if the following applies:**

- The driver operates within a 100 air-mile radius of the normal work reporting location; and
- The driver returns to the work reporting location and is released from work within 12 consecutive hours; and
- The driver has at least 10 consecutive hours off duty separating each 12 hours on duty; and
- The driver does not exceed 11 hours maximum driving time following 10 consecutive hours off duty; and
- The motor carrier that employs the driver maintains and retains for a period of 6 months accurate and true time records showing:
  - The time the driver reports for duty each day;
  - The total number of hours the driver is on duty each day;
  - The time the driver is released from duty each day; and
  - The total time for the proceeding 7 days in accordance with Part 395.8(j)(2) for drivers used for the first time or intermittently.

The driver may extend the 14 hour rule to 16 hours one day in every 7/8 day period provided he has returned to his normal work reporting location and is released from duty at that location for the prior five duty tours and makes a log for that day.

| Date | Start Time<br>All Duty | End Time<br>All Duty | Total Hours | Truck # | Driving<br>CMV<br>Yes/No | DVIR<br>Yes/No | Comments |
|------|------------------------|----------------------|-------------|---------|--------------------------|----------------|----------|
| 1    |                        |                      |             |         |                          |                |          |
| 2    |                        |                      |             |         |                          |                |          |
| 3    |                        |                      |             |         |                          |                |          |
| 4    |                        |                      |             |         |                          |                |          |
| 5    |                        |                      |             |         |                          |                |          |
| 6    |                        |                      |             |         |                          |                |          |
| 7    |                        |                      |             |         |                          |                |          |
| 8    |                        |                      |             |         |                          |                |          |
| 9    |                        |                      |             |         |                          |                |          |
| 10   |                        |                      |             |         |                          |                |          |
| 11   |                        |                      |             |         |                          |                |          |
| 12   |                        |                      |             |         |                          |                |          |
| 13   |                        |                      |             |         |                          |                |          |
| 14   |                        |                      |             |         |                          |                |          |
| 15   |                        |                      |             |         |                          |                |          |
| 16   |                        |                      |             |         |                          |                |          |
| 17   |                        |                      |             |         |                          |                |          |
| 18   |                        |                      |             |         |                          |                |          |
| 19   |                        |                      |             |         |                          |                |          |
| 20   |                        |                      |             |         |                          |                |          |
| 21   |                        |                      |             |         |                          |                |          |
| 22   |                        |                      |             |         |                          |                |          |
| 23   |                        |                      |             |         |                          |                |          |
| 24   |                        |                      |             |         |                          |                |          |
| 25   |                        |                      |             |         |                          |                |          |
| 26   |                        |                      |             |         |                          |                |          |
| 27   |                        |                      |             |         |                          |                |          |
| 28   |                        |                      |             |         |                          |                |          |
| 29   |                        |                      |             |         |                          |                |          |
| 30   |                        |                      |             |         |                          |                |          |
| 31   |                        |                      |             |         |                          |                |          |

# DRIVERS TIME RECORD FOR A PROPERTY CARRYING NON-CDL COMMERCIAL DRIVER

Driver's Name (print) \_\_\_\_\_ Employee No. \_\_\_\_\_ Month \_\_\_\_\_ Year \_\_\_\_\_

**Driver's may prepare this report instead of the "drivers daily log" if the following applies:**

- The driver operates within a 150 air-mile radius of the normal work reporting location; and
- **The driver returns to the normal work reporting location at the end of each duty tour; and**
- The driver has at least 10 consecutive hours off duty separating each duty tour; and
- The driver does not exceed 11 hours maximum driving time following 10 consecutive hours off duty; and
- **The driver does not drive after the 14<sup>th</sup> hour of coming on duty 5 days of any period of 7 consecutive days; and**
- The driver does not drive after the 16<sup>th</sup> hour of coming on duty 2 days of any period of 7 consecutive days; and
- The motor carrier that employs the driver maintains and retains for a period of 6 months accurate and true time records showing:
  - The time the driver reports for duty each day;
  - The total number of hours the driver is on duty each day;
  - The time the driver is released from duty each day; and
  - The total time for the proceeding 7 days in accordance with Part 395.8(j)(2) for drivers used for the first time or intermittently.

| Date | Start Time<br>All Duty | End Time<br>All Duty | Total Hours | Truck # | Driving<br>CMV<br>Yes/No | DVIR<br>Yes/No | Comments |
|------|------------------------|----------------------|-------------|---------|--------------------------|----------------|----------|
| 1    |                        |                      |             |         |                          |                |          |
| 2    |                        |                      |             |         |                          |                |          |
| 3    |                        |                      |             |         |                          |                |          |
| 4    |                        |                      |             |         |                          |                |          |
| 5    |                        |                      |             |         |                          |                |          |
| 6    |                        |                      |             |         |                          |                |          |
| 7    |                        |                      |             |         |                          |                |          |
| 8    |                        |                      |             |         |                          |                |          |
| 9    |                        |                      |             |         |                          |                |          |
| 10   |                        |                      |             |         |                          |                |          |
| 11   |                        |                      |             |         |                          |                |          |
| 12   |                        |                      |             |         |                          |                |          |
| 13   |                        |                      |             |         |                          |                |          |
| 14   |                        |                      |             |         |                          |                |          |
| 15   |                        |                      |             |         |                          |                |          |
| 16   |                        |                      |             |         |                          |                |          |
| 17   |                        |                      |             |         |                          |                |          |
| 18   |                        |                      |             |         |                          |                |          |
| 19   |                        |                      |             |         |                          |                |          |
| 20   |                        |                      |             |         |                          |                |          |
| 21   |                        |                      |             |         |                          |                |          |
| 22   |                        |                      |             |         |                          |                |          |
| 23   |                        |                      |             |         |                          |                |          |
| 24   |                        |                      |             |         |                          |                |          |
| 25   |                        |                      |             |         |                          |                |          |
| 26   |                        |                      |             |         |                          |                |          |
| 27   |                        |                      |             |         |                          |                |          |
| 28   |                        |                      |             |         |                          |                |          |
| 29   |                        |                      |             |         |                          |                |          |
| 30   |                        |                      |             |         |                          |                |          |
| 31   |                        |                      |             |         |                          |                |          |

## DRIVER STATEMENT OF ON-DUTY HOURS

INSTRUCTIONS: Motor carriers, when using a driver for the first time or intermittently, shall obtain from the driver a signed statement giving the total time on duty during the immediately preceding 7 days and time at which the driver was last relieved from duty prior to beginning work for the motor carrier as per Part 395.8(j)(2) Federal Motor Carrier Safety Regulations (FMCSR). NOTE: Hours for any compensated work during the preceding 7 days, including work for a non-motor carrier entity, must be recorded on this form.

Driver Name (Print): \_\_\_\_\_

Driver's License Number: \_\_\_\_\_ Class: \_\_\_\_\_ Endorsement(s): \_\_\_\_\_ Restriction(s): \_\_\_\_\_

Type of License: \_\_\_\_\_ Issuing State: \_\_\_\_\_

|                 |                                 |   |   |   |   |   |   |             |
|-----------------|---------------------------------|---|---|---|---|---|---|-------------|
| DAY             | 1<br><small>(Yesterday)</small> | 2 | 3 | 4 | 5 | 6 | 7 |             |
| DATE            |                                 |   |   |   |   |   |   |             |
| HOURS<br>WORKED |                                 |   |   |   |   |   |   | TOTAL HOURS |

I hereby certify that the information given above is correct to the best of my knowledge and belief and that I was last relieved from work at:

\_\_\_\_\_ On \_\_\_\_\_  
 Time Day Month Year

\_\_\_\_\_ Date  
 Driver's Signature

INSTRUCTIONS: When employed by a motor carrier, a driver must report to the carrier all on duty time including time working for other employers. The definition of on duty time found in Section 395.2(8)(9) of the FMCSR's includes time performing any other work in the capacity of, or in the employ or service of, a common, contract or private motor carrier, also performing any compensated work for any non-motor carrier entity.

Are you currently working for another employer?  Yes  No

At this time do you intend to work for another employer while still employed by this company?  Yes  No

I hereby certify that the information given above is true and I understand that once I become employed with this company, if I begin working for any additional employer's for compensation that I must inform this company immediately of such employment activity.

\_\_\_\_\_  
Drivers Signature

\_\_\_\_\_  
Date

# Title 49 CFR, Part 395

## Passenger Carrying Hours-of-Service

### Definitions

“On duty time” is all time a driver spends performing work, or being ready to work, until being relieved by the carrier of all responsibility. “On duty” time also includes any compensated work performed by the driver for a non-motor carrier entity.

“Driving time” is all time spent at the driving controls of a commercial motor vehicle in operation.

“Off duty” means the driver has been relieved of all responsibilities and is not ready for work.

“Record of duty status” is the tracking of work hours by means of a graph, grid, log or automatic on-board recording device.

“Time record” is a time card or other record showing the time the driver reports for duty each day, total hours the driver is on duty each day, time the driver is released from duty each day, and total time for preceding days if the driver is used for first time or intermittently.

**A motor carrier may not permit or require a driver to drive and no driver shall drive after:**

10 hours driving time following 8 consecutive hours off-duty; being on duty 15 hours following 8 consecutive hours off duty; being on duty 60 hours in a 7 day period; being on duty 70 hours in any period of 8 consecutive days if the carrier operates every day of the week.

Time spent by a driver in a compensated non-motor carrier position is considered on duty time and must be included in the 15 hour and 60/70 hour rules. (Example: a part time position is a retail store.)

**What record keeping is required?**

Motor carriers shall require every driver to record duty status in duplicate for each 24-hour period.

**What must be on the log?**

A record of duty status must:

- Be on specific grid or automatic on-board recorder;
- Be current to the last change of duty status;
- Have legible entries in driver’s own handwriting;
- Show month, day, and year with total miles driven and
- Total hours in each duty status for each 24 hours of record;
- Show vehicle number, or state and license number of each vehicle operated during that 24-hour period;
- Have carrier(s) name, for whom work was performed, and beginning and finishing times for each carrier.

**What does a driver need to have with them?**

A driver is required to have in possession a record of duty status for the previous 7 consecutive days unless an exception from regulation is granted.

**How long must records of duty status be kept?**

Record of duty status, supporting documents and time cards must be maintained and retained by the carrier for a period of six months.

**Automatic on-board recording devices**

Automatic on-board recording devices must provide immediate status verification of time and sequence of duty, status changes, current hours of service and previous 7-day status. Electronic devices must follow the rules under Section 395.15.

**100 air-mile radius exemption**

Drivers are exempt from keeping logbooks if all of the following requirements are met:

- Operates within 100 air mile radius (115.08 miles) of the normal work reporting location.
- Returns to the work reporting locations and is relieved of duties within 12 hours.
- Does not exceed 10 hours driving.
- Eight consecutive hours off duty separate each 12 hours on duty, and
- Carrier maintains for a period of 6 months, true and accurate time records showing; start and ending times, total hours worked, total time for preceding seven days if driver is used for the first time or intermittently.

**Over hours and/or false logs**

Drivers found driving in excess of maximum hours or failing to keep a proper record of duty status for current day and 7 prior consecutive days shall be put out of service. A driver that is out of service (OOS) shall not be required or permitted to drive and a driver may not drive a commercial motor vehicle until the driver has hours available.

# Title 49 CFR, Part 396

## Vehicle Maintenance Standards

Vehicle inspections, repair and maintenance are critical to the safe operation of commercial motor vehicles. They are designed to reduce accidents, injuries and fatalities resulting from unsafe vehicles operating on the highways. Maintenance standards cover systematic maintenance, pre-trip/post-trip inspection reports and annual inspections.

- General standards** | 393 (Parts and Accessories) and 396 (Inspection, Repair and Maintenance)
- A carrier is responsible for ensuring that it properly inspects repairs and maintains vehicles under its control.
  - A motor vehicle may not be operated when its mechanical condition is likely to cause an accident or breakdown.
  - Parts and accessories must be in safe operating condition at all times.
  - A vehicle must be maintained according to the vehicle manufacture's recommended schedule, or an improved schedule based on actual operating conditions, and
  - Push out windows, emergency doors and emergency door markings. Lights in buses must be inspected at least every 90 days.

- Required records** | For each vehicle a carrier controls for 30 consecutive days or more, the carrier must ensure the proper vehicle maintenance records are maintained. Each vehicle record must contain:
- Vehicle identification including company number, make, serial number, year and tire size.
  - If the vehicle is leased, the person furnishing the vehicle must be identified.
  - A means to indicate the nature and due date of various inspection and maintenance operations to be performed.
  - A record or log of inspections, repair and maintenance indicating their date and nature.
  - A record of tests conducted on push out windows, emergency doors, and emergency door marking lights on buses.

**Where must records be maintained?** | Vehicle maintenance records must be retained where the vehicle is maintained for a period of one year and for six months after the vehicle leaves the carrier's control.

**Roadside inspection reports** | Any driver who receives a roadside inspection report must deliver it to the motor carrier. An official of the motor carrier is to examine the roadside inspection report and ensure that the violations or defects noted on the report are corrected before the vehicle is re-dispatched. Within 15 days after the inspection, the carrier must sign the completed roadside inspection report to certify that all violations have been corrected and then return it to the indicated address. **A copy must be retained for 12 months from the date of inspection.**

**Driver vehicle inspection report**

The motor carrier shall require a driver to conduct a pre and post trip vehicle inspection each day the vehicle is operated. The following are the minimum items to be checked:

- |  |                     |
|--|---------------------|
| Parking (hand) brake                               | Steering mechanism  |
| Lighting devices and reflectors                    | Horn                |
| Tires  | Windshield wipers   |
| Rear vision mirrors                                | Coupling devices    |
| Wheels and rims                                    | Emergency equipment |
| Service brakes including trailer brake connections |                     |

A written report must be completed at the end of the day when defects are discovered. The report shall identify the vehicle, any defect or deficiency discovered by the driver, which would affect the safety of the operation of the vehicle or result in its mechanical breakdown.

**When defects are noted on the driver vehicle inspection report**

In the instance of drivers discovering defects the driver shall sign the report, the motor carrier shall repair any defect or deficiency listed on the driver vehicle inspection report, which would likely affect the safety of operation of the vehicle. Every motor carrier or its agent shall certify on the original driver vehicle inspection report any listed defect that has been repaired or that repair is unnecessary before the vehicle is operated again. **These reports shall be maintained for a period of three months.**

Before driving a motor vehicle the driver shall be satisfied that the vehicle is in safe operating condition, review the last driver vehicle inspection report; and sign the report to acknowledge that the driver has reviewed it and that there is a certification that the required repairs have been performed.

**Periodic inspection**

**Every commercial vehicle shall have a periodic inspection that must be performed at least once every 12 months.** At a minimum, inspections must include all items enumerated in the Minimum Periodic Inspection Standards, Appendix G, Subchapter B, Part 396. Carriers may perform required annual inspections themselves, with a qualified inspector. The original or copy of the periodic inspection report must be retained by the motor carrier for **14 months** from the report date. Utah based carriers must meet the mandatory State Inspection standards.

Documentation of the most recent periodic inspection must be kept on the vehicle (report, sticker or decal). Utah based carriers must meet the mandatory State Inspection Standards.

**Inspector qualifications**

A motor carrier must ensure that the individual(s) performing an annual inspection is qualified. The inspector must:

- Understand the inspection standards of Part 393 and Appendix G.
- Be able to identify defective components.
- Have knowledge and proficiency in methods, procedures and tools.
- Utah based carriers must meet the mandatory State Inspection Standards.

**What experience or training qualifies an inspector?**

- Inspectors may have gained experience or training by:
- Completing a State/Federal training program, or earning a State or Canadian Province qualifying certificate in commercial motor vehicle safety inspections.
  - A combination of other training or experience totaling at least a year.

**Evidence of qualification**

**Evidence of the inspector's qualification must be maintained until one year after the inspector ceases to perform inspections for the carrier.**

**Brake inspectors**

The motor carrier is responsible for ensuring that all inspections, maintenance, repairs and service to brakes of commercial motor vehicles comply with these regulations. Employees responsible for brake inspections, maintenance, service or repairs must meet minimum brake inspector qualifications. (Sample certificate on next page)

**Emergency Equipment**

Per 393.95 - Each truck, truck tractor, and bus must be equipped with a fire extinguisher which is marked with a 5 B:C rating or more or two extinguishers marked with a 4 B:C rating or more *and* 3 bidirectional emergency reflective triangles or 3 liquid burning flares

# DRIVER'S INSPECTION REPORT

White - Maintenance  
Canary - Driver Review

COMPLETION OF THIS REPORT REQUIRED BY FEDERAL LAW, 49 CFR 396.11 & 396.13.

Truck or Tractor No. \_\_\_\_\_ Mileage (No Tenths) \_\_\_\_\_ Trailer No. \_\_\_\_\_

Dolly No. \_\_\_\_\_ Trailer No. \_\_\_\_\_ Location \_\_\_\_\_  
ATA/VMRS System Code Numbers for Shop Use Only CHECK DEFECTS ONLY. Explain under REMARKS.

| POWER UNIT   |  |   |
|--|--|---|
| <b>GENERAL CONDITION</b><br><input type="checkbox"/> 02 Cab/Doors/Windows<br><input type="checkbox"/> 02 Body/Doors<br><input type="checkbox"/> ___ Oil Leak _____<br><input type="checkbox"/> ___ Grease Leak _____<br><input type="checkbox"/> 42 Coolant Leak<br><input type="checkbox"/> 44 Fuel Leak<br><input type="checkbox"/> ___ Other _____<br><p style="text-align: center;">(IDENTIFY)</p> | <b>IN-CAB</b><br><input type="checkbox"/> 03 Gauges/Warning Indicators<br><input type="checkbox"/> 02 Windshield Wipers/Washers<br><input type="checkbox"/> 54 Horns<br><input type="checkbox"/> 01 Heater/Defroster<br><input type="checkbox"/> 02 Mirrors<br><input type="checkbox"/> 15 Steering<br><input type="checkbox"/> 23 Clutch<br><input type="checkbox"/> 13 Service Brakes<br><input type="checkbox"/> 13 Parking Brake<br><input type="checkbox"/> 13 Emergency Brakes<br><input type="checkbox"/> 53 Triangles<br><input type="checkbox"/> 53 Fire Extinguisher<br><input type="checkbox"/> 53 Other Safety Equipment<br><input type="checkbox"/> 34 Spare Fuses<br><input type="checkbox"/> 02 Seat Belts<br><input type="checkbox"/> ___ Other _____<br><p style="text-align: center;">(IDENTIFY)</p> | <b>EXTERIOR</b><br><input type="checkbox"/> 34 Lights<br><input type="checkbox"/> 34 Reflectors<br><input type="checkbox"/> 16 Suspension<br><input type="checkbox"/> 17 Tires<br><input type="checkbox"/> 18 Wheels/Rims/Lugs<br><input type="checkbox"/> 32 Battery<br><input type="checkbox"/> 43 Exhaust<br><input type="checkbox"/> 13 Brakes<br><input type="checkbox"/> 13 Air Lines<br><input type="checkbox"/> 34 Light Line<br><input type="checkbox"/> 49 Fifth Wheel<br><input type="checkbox"/> 49 Other Coupling<br><input type="checkbox"/> 71 Tie-Downs<br><input type="checkbox"/> 14 Rear-End Protection<br><input type="checkbox"/> ___ Other _____<br><p style="text-align: center;">(IDENTIFY)</p> |
|  |  | <input type="checkbox"/> NO DEFECTS   |

| TOWED UNIT(S)   |   |   |
|---|---|---|
| <input type="checkbox"/> 71 Body/Doors<br><input type="checkbox"/> 71 Tie-Downs<br><input type="checkbox"/> 34 Lights<br><input type="checkbox"/> 34 Reflectors | <input type="checkbox"/> 16 Suspension<br><input type="checkbox"/> 17 Tires<br><input type="checkbox"/> 18 Wheels/Rims/Lugs<br><input type="checkbox"/> 13 Brakes | <input type="checkbox"/> 77 Landing Gear<br><input type="checkbox"/> 59 King Pin/Upper Plate<br><input type="checkbox"/> 59 Fifth-Wheel (Dolly)<br><input type="checkbox"/> 59 Other Coupling Devices |
|   |   | <input type="checkbox"/> 79 Rear End Protection<br><input type="checkbox"/> ___ Other _____<br><p style="text-align: center;">(IDENTIFY)</p> <input type="checkbox"/> NO DEFECTS                      |

REMARKS: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

|   |   |
|---|---|
| REPORTING DRIVER: _____ Date _____<br>Name _____ Emp. No. _____ | MAINTENANCE ACTION: _____ Date _____<br>Repairs Made <input type="checkbox"/> No Repairs Needed <input type="checkbox"/><br>R.O.#'S _____<br>Certified By: _____<br>Location: _____ |
| REVIEWING DRIVER: _____ Date _____<br>Name _____ Emp. No. _____ |   |

SHOP REMARKS: \_\_\_\_\_  
 \_\_\_\_\_

**BRAKE CERTIFICATION - 49 CFR, Part 396.25**

A “brake inspector” is any employee of a motor carrier who is responsible for ensuring all brake inspections, maintenance, service, or repairs to any commercial motor vehicle, subject to the motor carrier’s control, meet the applicable Federal standards.

No motor carrier shall require or permit any employee who does not meet minimum brake inspector qualifications to be responsible for the inspection, maintenance, service or repairs of any brakes on its commercial motor vehicles.

**Minimum Qualifications**

- Understands and can perform brake service and inspection.
- Is knowledgeable of and has mastered the methods, procedures, tools and equipment necessary to perform brake service and inspection.
- Is capable of performing brake service or inspection by reason of experience, training or both, and qualify in one of the following categories ( check all that apply):
  - I. \_\_\_\_ Has successfully completed an apprenticeship program sponsored or approved by a State, Canadian Province, a federal agency or labor union or has a certificate from a State or Canadian Province which qualifies the person to perform brake service or inspections. Specify: \_\_\_\_\_  
\_\_\_\_\_

**OR**

- II. \_\_\_\_ Has brake-related training or experience or a combination thereof totaling at least one year as follows (check all that apply):
  - \_\_\_ 1. Participation in a brake maintenance or inspection training program sponsored by a brake or vehicle manufacturer or similar commercial training program. Where and Date: \_\_\_\_\_  
\_\_\_\_\_
  - \_\_\_ 2. \_\_\_\_ (years) experience performing brake maintenance or inspection in a motor carrier maintenance program. Name and Date: \_\_\_\_\_  
\_\_\_\_\_
  - \_\_\_ 3. \_\_\_\_ (years) experience performing brake maintenance or inspection at a commercial garage, fleet leasing company, or similar facility. Name of Facility and Dates: \_\_\_\_\_  
\_\_\_\_\_

I certify the above information is true and accurate to the best of my knowledge:

Employee \_\_\_\_\_  
Signature of Mechanic/Inspector Date

Motor Carrier/Company \_\_\_\_\_  
Signature of Employer/Supervisor Date

Evidence of Inspector’s Qualifications on file at: \_\_\_\_\_

# Title 49 CFR, Part 382

## Controlled Substance and Alcohol Testing

Most drivers of commercial motor vehicles (CMV's) engaged in interstate and intrastate transportation are subject to controlled substances and alcohol testing under the Code of Federal Regulations, Title 49 Parts 40 and 382. Employers are required to have a program and procedures in place to insure that all drivers who are required to possess a commercial driver's license (CDL), *and* who operate a commercial vehicle, are tested for drug and alcohol use. The purpose of controlled substance testing is to reduce highway accidents that result from driver use of these substances. For the purposes of Part 382 and 383 the definition of a commercial motor vehicle is defined separately in each of those sections as listed below.

### **A commercial motor vehicle (CMV)**

A commercial motor vehicle:

- Has a gross combination weight rating of 26,001 or more pounds inclusive of a towed unit with a gross vehicle weight rating or more than 10,000 pounds; or
- Has a gross vehicle rating of 26, 001 pounds; or
- Is designed to transport 16 or more passengers, including the driver; or
- Is of any size and is used in transportation of hazardous materials which requires a placard on the vehicle.

### **This law applies to:**

This law applies to:

- For hire and private companies;
- Federal, state and local governments;
- Civic and church organizations;
- Farmers and custom harvesters unless exempted from CDL;
- Apiarian industries (beekeeping)

### **Alcohol Definitions**

“**Alcohol**” is the intoxication agent in beverage alcohol, ethyl alcohol, or low molecular weigh alcohol including methyl and isopropyl alcohol.

“**Alcohol use**” is the consumption of any beverage, mixture or preparation (including medication) that contains alcohol.

### **Alcohol Prohibitions**

The alcohol rule prohibits any alcohol use that could affect performance of a safety-sensitive function, including:

- Reporting for duty or remaining on duty to perform safety-sensitive functions with alcohol concentration of 0.04 BAC or greater;
- Use while performing safety-sensitive functions;
- Use during the 4 hours before performing safety-sensitive functions;
- Possession of alcoholic substances, unless transported and manifested as part of a shipment.
- Use during 8 hours following an accident, or until driver undergoes a post-accident test, whichever occurs first.
- Refusal to take a required test.

**Required Testing**

Drivers required to have a commercial driver’s license (CDL) are subject to:

- Pre-employment drug testing (a verified **negative** test result)
- Post-accident drug and alcohol testing, drivers must be tested for alcohol within 2 hours, but not more than 8 hours, of the accident and within 32 hours for controlled substances. (If testing is not completed within the allotted time frame a written record stating the reason the test was not promptly administered shall be maintained on file).

| Post Accident Testing Chart  |                               |                                    |
|--|-------------------------------|------------------------------------|
| Type of accident involved  | Citation issued to CMV driver | Test must be performed by employer |
| Human Fatality   | Yes<br>No                     | Yes<br>Yes                         |
| Bodily injury with immediate medical treatment away from the scene | Yes<br>No                     | Yes<br>No                          |
| Disabling damage to any motor vehicle requiring tow away           | Yes<br>No                     | Yes<br>No                          |

- Random testing; must include more than one driver, use a scientifically valid method and ensure each driver has an equal chance of being tested each time. (50% of all driver positions must be tested for controlled substances and 10% of all driver positions must be alcohol tested in a calendar year).
- Reasonable suspicion testing (supervisor receive 60 min. each drug and alcohol training)
- Return to duty (a verified **negative** test result must be received before performing a safety sensitive function)
- Follow-up (SAP to determine a substance abuse plan to include at a minimum 6 unannounced follow-up tests in the first 12 months.)

**Controlled Substance Testing**

Employers are required to do a five-panel test for the following controlled substances:

- Marijuana
- Cocaine
- Opiates
- Amphetamines
- Phencyclidine (PCP)

**Drug Prohibitions**

A driver may not report for duty (or remain on duty) to perform safety-sensitive functions if:

- The driver uses any of the above-mentioned drugs unless prescribed by a doctor who has told the driver that the use will not adversely affect the driver’s ability to operate a CMV safely.

**Drug Prohibitions  
(continued)**

- The driver tests positive for controlled substance use; or
- The driver refuses to take a required test.

**Consequences**

A driver who violates any of the above provisions *must*:

- Not perform, nor be permitted to perform, a safety-sensitive function
- Be referred to a substance abuse professional (SAP) for evaluation to determine what assistance is needed.
- Undergo a return-to-duty test for alcohol or drugs resulting in a verified negative result.
- Be subject to unannounced follow-up testing after returning to work.

**Previous employer  
background checks**

An employer must make inquiries to previous CDL employers for 3 years (49 CFR 382.413). This investigation must be made within 30 days of the date that his/her employment begins. Provide previous employers with a written consent for release of information. Investigations shall include verified positive tests, refusals to be tested and successful completion of DOT return-to-duty requirements. (Investigations shall include requirements of (CFR Part 40.25)

**Access to Records**

An employer **must obtain**, pursuant to a driver's written consent, the driver's alcohol and drug compliance records from previous employers for the prior 3 years. A previous employer, pursuant to a driver's written consent, **must release** a driver's alcohol and drug compliance records to a prospective employer. Carriers **must make** all records related to the administration of their testing programs and individual test results to any DOT agency, or any State or local officials with regulatory authority over the employer or any of its drivers.

## Drug and Alcohol Previous Employer Inquiry

**PART 1:****TO BE COMPLETED BY PROSPECTIVE EMPLOYEE**

I, \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_  
FIRST M.I. LAST SOCIAL SECURITY NUMBER

Do hereby authorize my:

**Previous Employer:** \_\_\_\_\_ Phone: \_\_\_\_\_  
Address: \_\_\_\_\_ Fax: \_\_\_\_\_  
City, State, Zip: \_\_\_\_\_ E-mail: \_\_\_\_\_

To release all information regarding my services, character, and conduct while in your employ, and you are released from any and all liability, which may result from furnishing such information to the prospective employer listed below:

**Perspective Employer:** \_\_\_\_\_ Phone: \_\_\_\_\_  
Address: \_\_\_\_\_ Fax: \_\_\_\_\_  
City, State, Zip: \_\_\_\_\_ E-mail: \_\_\_\_\_

In compliance with Part 391.23(h), release of this information must be made in a written form that ensures confidentiality, such as fax, e-mail or letter.

\_\_\_\_\_  
APPLICANT'S SIGNATURE

\_\_\_\_\_  
DATE

This information is being requested in compliance with CFR 40.25(g) and 391.23(c)(1).

**PART 2:****TO BE COMPLETED BY PREVIOUS EMPLOYER**

If driver was not subject to Department of Transportation testing requirements while employed by your company, please check here.

Reason not subject: \_\_\_\_\_

The applicant named above was employed by us from (m/y) \_\_\_\_\_ to (m/y) \_\_\_\_\_ and was subject to Department of Transportation drug and alcohol requirements.

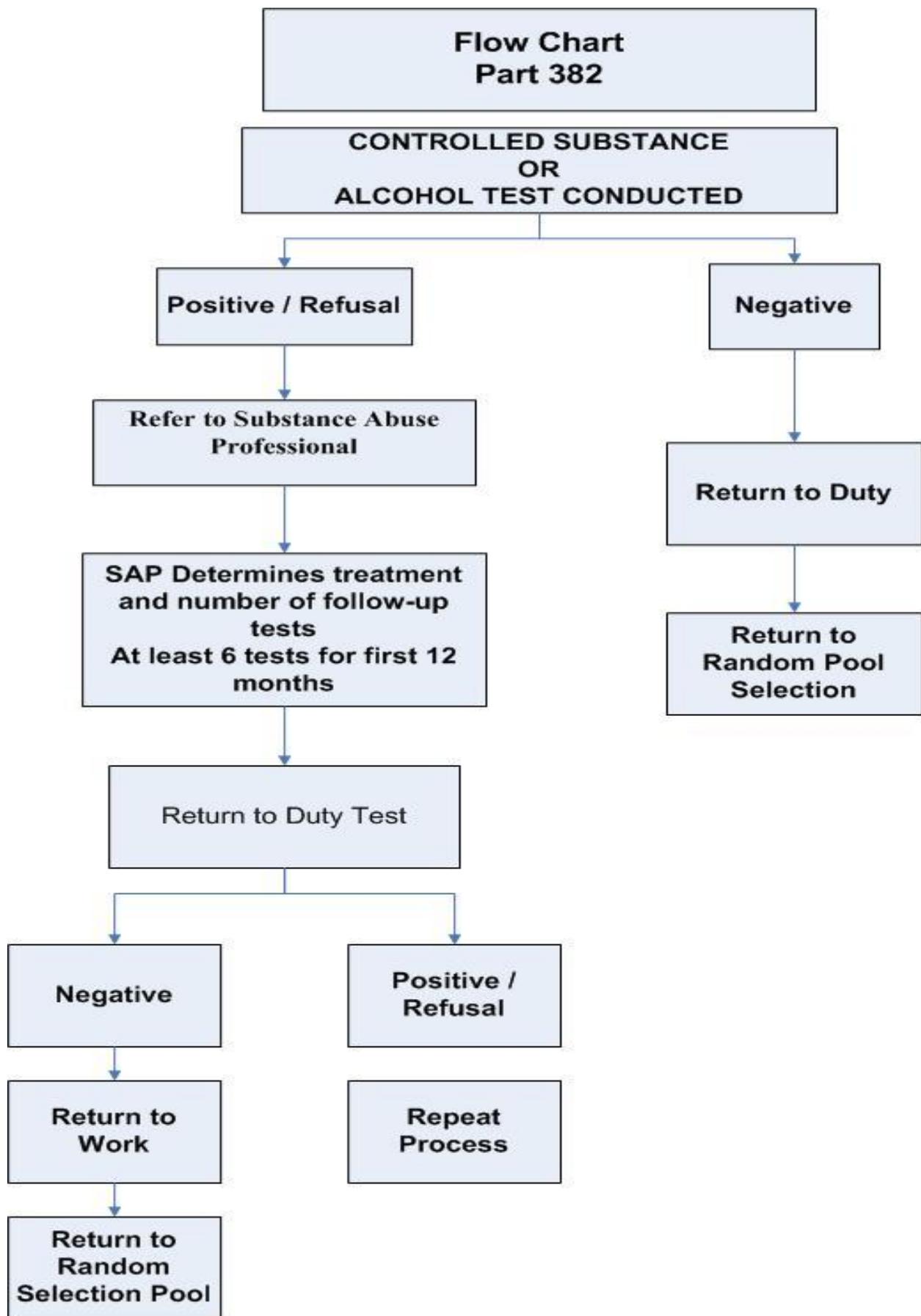
1. Has this person had an alcohol test with the result of 0.04 or higher alcohol concentration?  
 Yes Date \_\_\_\_\_  No
2. Has this person tested positive or adulterated or substituted a test specimen for controlled substances?  
 Yes Date \_\_\_\_\_  No
3. Has this person refused to submit to a post-accident, random, reasonable suspicion, follow-up alcohol or controlled substance test?  
 Yes Date \_\_\_\_\_  No
4. Has this person committed any other violation of Subpart B of Part 382, or Part 40?  
 Yes Date \_\_\_\_\_  No
5. If this person has violated a DOT drug and alcohol regulation, did this person complete a SAP-prescribed rehabilitation program in your employ, including return-to-duty and follow-up tests? If yes, please send documentation back with this form.  
 Yes Date \_\_\_\_\_  No
6. For a driver who successfully completed a SAP's rehabilitation referral and remained in your employ, did this driver subsequently have an alcohol test result of 0.04 or greater, a verified positive drug test, or refuse to be tested?  
 Yes Date \_\_\_\_\_  No
7. In answering these questions, include any required DOT drug or alcohol testing information obtained from prior previous employers in the previous 3 years prior to application date.

**Person providing information:**

Print Name: \_\_\_\_\_ Position: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

The person identified above is seeking employment with this company, as a driver who is subject to the alcohol/controlled substance testing provision of the Federal Motor Carrier Safety Regulations of 49 CFR Part 40.25 and Part 382.413. Pursuant to the aforementioned codes, with the driver's written consent, we request the results of related testing of this individual while in your control. The Federal Regulations mandate that we receive your reply within 14 days from request.



***CANNOT USE DRIVER UNTIL A NEGATIVE TEST HAS BEEN RECEIVED!***

# Title 49 CFR, Part 383

## CDL Standards-Requirements and Penalties

For the purposes of Part 382 and 383 the definition of a commercial motor vehicle is defined separately in each of those sections as listed below.

### **Standards**

The licensing provisions in Part 383 are intended to help reduce accidents by setting standards that:

- Require commercial drivers to be properly qualified and to hold a single valid driver's license (CDL); and
- Disqualify drivers who do not operate commercial motor vehicles (CMV) safely.

### **Commercial Driver's License Information System (CDLIS)**

CDLIS enables the State to exchange information about the driving records and driver's licenses of CMV drivers. This helps assure that only one license is issued to a driver and that drivers currently disqualified are prevented from obtaining a CDL. Employers have access to the CDLIS clearinghouse through their State's vehicle licensing agency.

### **Vehicles requiring commercial driver's licenses**

Drivers must hold a CDL if they operate in interstate, intrastate or foreign commerce and drive a vehicle:

- With a gross vehicle weight rating (GVWR) or gross combination weight (GCVW) of at least 26,001 pounds or;
- Designed to transport at least 16 passengers including the drivers; or
- Transporting a quantity of hazardous material requiring placarding.

Because the CDL is a state-issued license, you should check with appropriate State officials regarding particular license classes and specific exemptions.

### **LCV Certification Requirements**

CDL Drivers of Longer Combination Vehicles (LCV) must meet minimum requirements for special training through:

- LCV Driver-Training Certificate of Grandfathering, or
- LCV Driver-Training Certificate

**Notification to employer and licensing state**

Upon conviction for any State or local traffic violations, a driver must notify his/her employer(s) within 30 days. This notification must be in writing and must include the following information:

- Driver's full name
- Driver's license number
- Date of conviction
- Details about the offense, including any resulting suspension, revocation, or cancellation of driving privileges
- Indication of whether the violation happened in a CMV
- Location of offense, and
- Driver's signature

**Disqualifying Offenses**

No employer shall knowingly allow, require, permit or authorize a disqualified driver to drive a CMV. Disqualifying offenses include:

- Driving a CMV while under the influence of alcohol
- Driving a CMV while under the influence of a disqualifying drug or other controlled substance
- Leaving the scene of an accident that involves a CMV
- Using a CMV to commit a felony
- Using a CMV to commit serious traffic violations
- Using a CMV to violate an Out-of-Service Order
- Using a CMV to violate the Railroad-Highway Grade Crossing rule.

**Penalties**

A driver convicted of a felony offense for using a CMV for manufacturing, distributing or dispensing a controlled substance is disqualified for life, but may be eligible for reinstatement after 10 years.

**60-Day Suspensions**

A 60-day suspension will be imposed following conviction for two serious traffic violations within three years while driving a CMV. These violations include:

- Excessive speeding (15 miles per hour or more above the posted speed limit in a single offense)
- Reckless driving, improper or erratic lane changes, or following the vehicle ahead too closely; and
- Traffic offenses involving a fatal accident

**120-Day Suspensions**

A 120-day suspension will be imposed following three convictions of any serious violations within three years

**Implied Consent**

Any CDL holder is automatically considered to have consented to alcohol testing by a State or jurisdiction.

**Endorsements**

In addition to general knowledge and skills tests, drivers who operate specialized commercial motor vehicles must pass additional tests and obtain endorsements on the CDL, as follows:

- T-Double/triple trailers (knowledge test only)
- P-Passenger (knowledge and skills test)
- N-Tank vehicle (knowledge test only)
- H-Hazardous materials (knowledge test only)
- X-Combination of tank vehicle and hazardous materials (knowledge tests)

**Air Brake  
Restrictions**

If an applicant fails the air brake section of the knowledge test, or performs the skills test in a vehicle not equipped with air brakes, his/her CDL, if issued, will indicate that the license holder may not operate any CMV equipped with air brakes.

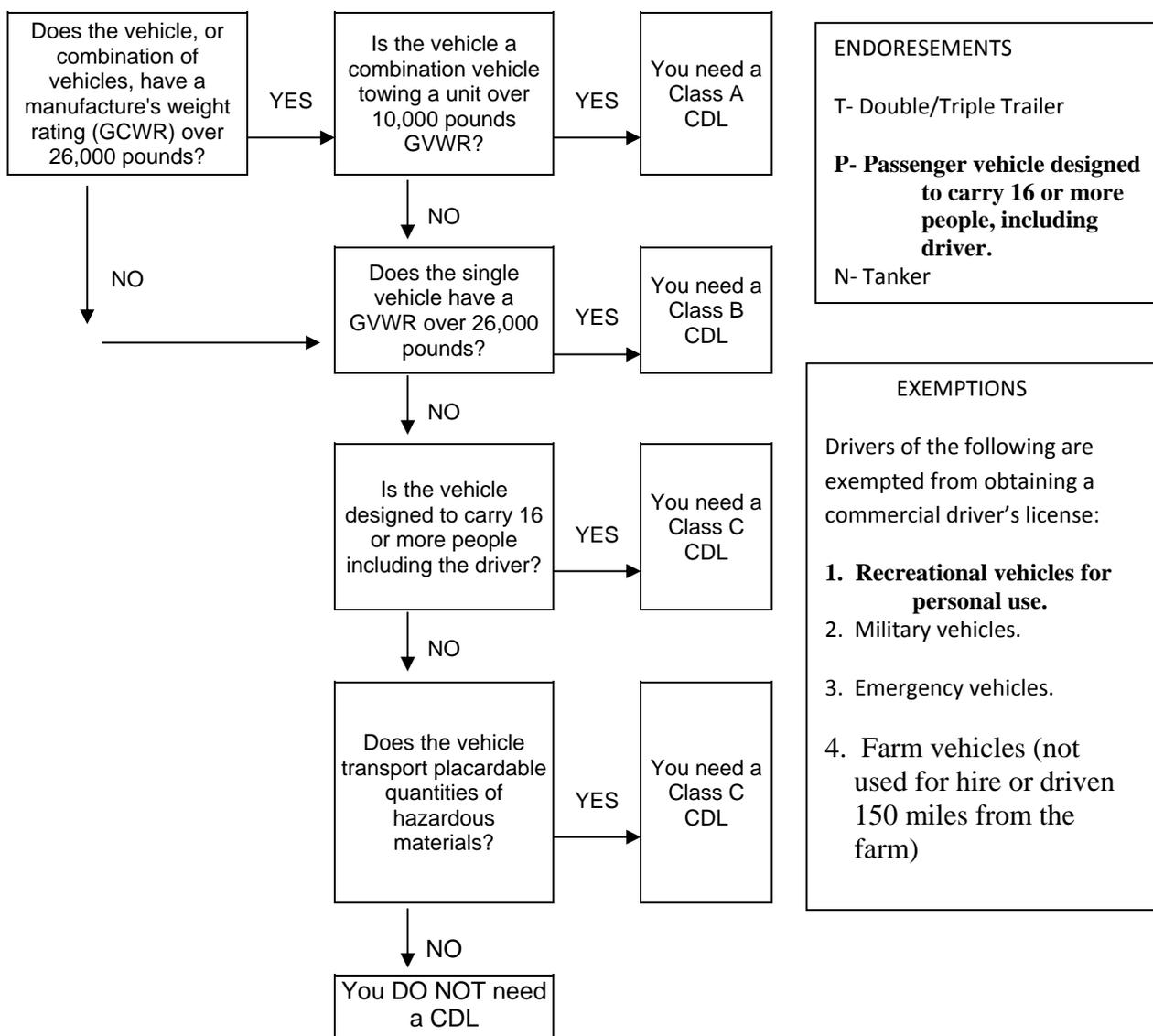
*Note: For the purposes of the skills test and the license restriction, air brakes include any braking system that operates fully or partially on the air brake principle.*

## DO YOU NEED A CDL?

There are three types of commercial driver's licenses: **Class A, B, And C**. Drivers of light vehicles – passenger cars and pick up trucks – will be issued an operator's license.

- **Class A** - Combination of vehicles with a gross combined weight rating (GCWR) over 26,000 pounds, provided the GVWR of the vehicle(s) being towed is greater than 10,000 pounds. A driver with a Class A license will be able to drive Class A, B, and C commercial vehicles with proper endorsements when required.
- **Class B** – Single vehicles with a GVWR over 26,000 pounds, or any such vehicle towing a vehicle under 10,000 GVWR. A driver with a Class B license will be able to drive Class B and C Commercial vehicles with proper endorsement when required.
- **Class C** – Vehicles with a GVWR less than 26,001 pounds. Class C is strictly for vehicles designed to carry 16 or more people or carry hazardous material in quantities large enough to require a placard. A class C license holder will be able to drive Class C commercial vehicles only.

Check the chart below to see what kind of commercial driver's license you will need:



# Title 49 CFR

## Hazardous Materials Regulations

### Applicability

The hazardous materials regulations are applicable to the transportation of hazardous materials in commerce and their offering to:

1. Interstate, intrastate, and foreign carriers by rail car, aircraft, motor vehicle and vessel.
2. The representation that a hazardous material is present in a package, container, rail car, aircraft, motor vehicle or vessel.
3. The manufacture, fabrication, marking, maintenance, reconditioning, repairing or testing of a package or container which is represented, marked, certified or sold for use in the transportation of hazardous materials (49 CFR 171.1(a)).

### Who is required to have HM Registration (PHMSA)?

Persons who offer for transportation, or transport in foreign, interstate or intrastate commerce: (a) any highway route controlled quantity of a Class 7 (radioactive) material; (b) more than 55 lbs of a Division 1.1, 1.2, or 1.3 (explosive) material in a motor vehicle, rail car or freight container; (c) more than 1 L per package of a material extremely poisonous by inhalation; (d) a hazardous material in a bulk packaging having a capacity of 3,500 gallons for liquids or gases, or more than 468 cubic feet for solids; (e) a shipment in other than bulk packaging of 5,000 lbs. gross weight or more of one class of hazardous material for which the transport vehicles requires placarding; (f) any quantity of materials requiring placarding.

### Hazardous Materials Safety Permits

After January 1, 2005, the Federal Motor Carrier Safety Administration (FMCSA) requires motor carriers to obtain a Hazardous Materials Safety Permit (HMSP) prior to transporting certain highly hazardous materials. An HMSP is required to transport any of the following materials.

1. A highway route-controlled quantity of a Class 7 (radioactive) material;
2. More than 55 lbs. of a Division 1.1, 1.2 or 1.3 (explosive) material or any amount of a Division 1.5 (explosive) material requiring placarding under 49 CFR 172;
3. More than one liter per package of a “material poisonous by inhalation,” that meets the criteria for “hazard zone A”;
4. A “material poisonous by inhalation,” that meets the criteria for “hazard zone B,” in a bulk packaging (greater than 119 gallons);

**Hazardous  
Materials  
Safety Permits**

5. A “material poisonous by inhalation,” that meets the criteria for “hazard zone C,” or “hazard zone D,” in a packaging having a capacity equal to or greater than 3,500 gallons.
6. A shipment of compressed or refrigerated liquefied methane or liquefied natural gas, or other liquefied gas with a methane content of at least 85 percent, in a bulk packaging having a capacity equal to or greater than 3,500 gallons.

If applicable, motor carriers will be required to apply for a HMSP the next time they are scheduled to file the MCS-150 form after January 1, 2005.

**Hazardous  
Materials  
Shipper/Carrier  
Responsibilities**

Shipper Responsibilities

- Determine whether a material meets the definition of a “hazardous material”
- Proper Shipping Name
- Class/Division
- Identification Number
- Hazard Warning Label
- Packaging
- Marking
- Employee Training
- Shipping Paper
- Emergency Response Information
- Emergency Response Telephone Number
- Certification
- Compatibility
- Blocking and Bracing
- Security Plan
- Incident Reporting

Listed above are the major responsibilities of HM shippers. General shipper responsibilities are contained in 49 CFR 173. Identification of a hazardous material is the first step, and frequently the most difficult. Of all the shippers’ (offerors) responsibilities, the requirement to properly classify a hazardous material is very important. It is from the proper identification of the hazardous material that the other requirements are based. A list of all material regulated by the DOT is located in section 172.101.

Carrier Responsibilities

- Shipping Paper
- Placard and Mark Vehicle
- Loading and unloading
- Compatibility
- Blocking and Bracing
- Incident Reporting
- Security Plan
- Employee training

**Hazardous  
Materials  
Shipper/Carrier  
Responsibilities  
(continued)**

The list above contains some of the major responsibilities of HM carriers. Carrier and offeror (shipper) responsibilities frequently overlap. When a motor carrier performs a shipper function, the carrier is responsible for performing that function in accordance with 49 CFR.

**HM Classes**

Class 1 = Explosives  
Class 2 = Gasses  
Class 3 = Flammable Liquid  
Class 4 = Flammable Solids  
Class 5 = Oxidizing Substances; Organic Peroxides  
Class 6 = Poisonous (Toxic) and Infectious Substances  
Class 7 = Radioactive Material  
Class 8 = Corrosives  
Class 9 = Misc. Dangerous Goods

**Definitions**

*Bulk packaging* means a packaging other than a vessel or barge, including a transport vehicle or freight container, in which hazardous materials are loaded with no intermediate form of containment and which has:

1. A maximum capacity greater than 119 gallons as a receptacle for a liquid;
2. A maximum net mass greater than 882 pounds and a maximum capacity greater than 119 gallons as a receptacle for a solid;
3. A water capacity greater than 1000 pounds as a receptacle for a gas as defined in 173.115.

*Consumer commodities* are materials that are packaged and distributed in a form intended for, or suitable for sale through retail sales. In order to determine if a particular hazardous material may qualify as a consumer commodity, refer to the section number in Part 173 identified in column 8 of the 172.101 Table for that material.

*Large packaging* means a packaging that—(1) Consists of an outer packaging that contains articles or inner packaging; (2) Is designated for mechanical handling; (3) Exceeds 400 kg net mass or 450 liters (118.9 gallons) capacity; (4) Has a volume of not more than 3 cubic meters (m<sup>3</sup>) (see § 178.801(i) of this subchapter); and (5) Conforms to the requirements for the construction, testing and marking of Large Packaging as specified in subparts P and Q of part 178 of this subchapter.

*Materials of Trade* transportation (see 49 CFR 171.8) by highway may be excepted from many of the requirements of the HM regulations when transported in accordance with the procedures contained in 49 CFR 173.6.

*ORM-D* materials are materials such as a consumer commodity, which although is subject to the regulations presents a limited hazard during transportation due to its form, quantity, and packaging. Each ORM-D material and category of ORM-D material is listed in the 49 CFR 172.101 Table and 173.144.

## Marking

The basic marking requirement consists of the proper shipping name and identification number of the hazardous materials contained in the package. Markings must be durable, in English and not obscured by other markings or labels.

## Labeling

General labeling requirements are contained in 49 CFR Subpart E Part 172. Each person who offers for transportation or transports a hazardous material shall ensure the package is properly labeled. There are a number of exceptions to the labeling requirements contained in 172.400.

## Placarding

General placarding requirements are contained in 172.504. Each bulk packaging, freight container, unit load device, transport vehicle or rail car containing any quantity of hazardous materials must be placarded on each side and each end with the placards specified in Tables 1 and 2

**Table 1 (Placard for any amount)**

| <b><i>Hazard class or division</i></b>                                       | <b><i>Placard name</i></b> |
|--|----------------------------|
| 1.1 .....  | Explosives 1.1             |
| 1.2 .....  | Explosives 1.2             |
| 1.3 .....  | Explosives 1.3             |
| 2.3 .....  | Poison Gas                 |
| 4.3 .....  | Dangerous When Wet         |
| 5.2 (Organic peroxide, Type B, liquid or solid, temperature controlled)..... | Organic Peroxide           |
| 6.1 (Materials Poison by Inhalation .....                                    | Poison Inhalation Hazard   |
| 7 (Radioactive Yellow III label only).....                                   | Radioactive                |

**Table 2 (Placard 1,001 lbs or more)**

| <b><i>Hazard class or division</i></b>   | <b><i>Placard name</i></b> |
|--|----------------------------|
| 1.4 .....  | Explosives 1.4             |
| 1.5 .....  | Explosives 1.5             |
| 1.6 .....  | Explosives 1.6             |
| 2.1 .....  | Flammable Gas              |
| 2.2.....   | Non-Flammable Gas          |
| 3 .....  | Flammable Liquid           |
| Combustible Liquid .....   | Combustible                |
| 4.1 .....  | Flammable Solid            |
| 4.2 .....  | Spontaneously Combustible  |
| 5.1 .....  | Oxidizer                   |
| 5.2 (Other than organic peroxide, Type B, liquid or solid, temperature controlled) ..... | Organic Peroxide           |
| 6.1 (Other than inhalation hazard, Zone A or B).....                                     | Poison                     |
| 6.2 .....  | (None)                     |
| 8 .....  | Corrosive                  |
| 9 .....  | Class 9 (172.504 (f)(9))   |
| ORM-D .....  | (None)                     |

## **Hazardous Materials Training**

**General awareness** training is intended to raise the hazmat employees' awareness of the HMR and the purpose and meaning of the hazard communication requirements. All hazmat employees must have this training

**Function-specific** training is intended to teach the necessary knowledge, skills and abilities for an individual's job function.

**Safety** training provides information concerning the hazards posed by materials in the workplace and personal protection measures

**Security** training must include an awareness of security risks associated with hazardous materials transportation and methods designed to enhance transportation security.

Hazmat employees must receive this training no later than March 24, 2006.

It is the hazmat employer's responsibility to determine the adequacy of the training being presented. Training may be in any appropriate format including lecture, conference, self paced instruction, interactive video, etc. All new hazmat employees must be trained within 90 days of employment and must be supervised until properly trained. Recurrent training must take place every three years.

A record of current training, inclusive of the preceding three years, in accordance with this subpart, shall be created and retained by each hazmat employer for as long as that hazmat employee is employed.

## **Security Plan**

Each hazmat employer subject to the security plan requirements (same as PHMSA registration requirements) is required to establish and implement a security plan. The purpose of this requirement is to enhance the security of hazardous materials transported in commerce. Employers must also train each employee on the security plan and its implementation.

Your Security Plan should be a complete document and should include: (a) information on your security assessment; (b) how you address any vulnerabilities identified in the assessment; (c) what security measures you have adopted; (d) how, when, and by whom they will be implemented; (e) your organizational structure; and (f) the responsibilities of the various employee positions. In essence, your security plan is the detailed map of how you address the security assessment

Each motor carrier should evaluate the threats it faces and its vulnerabilities based on its unique operations and facilities and should recognize that a cookie-cutter approach is not appropriate. The measures adopted by your company to address your vulnerabilities do not need to be complex or expensive to be effective, but the justification and rationale to support them needs to be sound and documented. The key to developing adequate security measures is to think "prevention." Understand that the threat is very real and try to think like a terrorist when assessing your security weaknesses. More information on security plans can be obtained at [www.fmcsa.dot.gov](http://www.fmcsa.dot.gov)

**Shipping  
Papers and  
Retention**

A person may not accept a hazardous material for transportation or transport a hazardous material by highway unless that person has received a shipping paper prepared in accordance with Part 172.

Shippers must retain a copy of the shipping paper for three years for hazardous waste and two years for all other hazardous materials, after the material is accepted by the initial carrier.

Carriers must retain a copy of the shipping paper for one year after the material is accepted by the carrier.

## **SUBSTANCE ABUSE and ALCOHOL TESTING**

A very basic list of consortiums has been provided. (For a complete list of available services in your area, look under “Drug Detection & Testing” in the local yellow pages.) These companies provide various services related to drug and alcohol testing. The office of Motor Carriers does not endorse any individual program. It is the responsibility of the employers to ensure that their program is administered in compliance with the regulations.

### **CONSORTIUM CONTACTS**

#### **ACCUSCAN DRUG TESTING**

Riverton 801-446-9000

#### **BLUELINE SERVICES**

Salt Lake 801-575-8378

#### **DAT EXPRESS TEST CENTERS**

Salt Lake 801-294-9474

St. George 435-656-1122

#### **GLOBAL DRUG TESTING SERVICES**

Salt Lake 801-363-4503

#### **IDT INTERMOUNTAIN DRUG TESTING**

Salt Lake 801-328-4027

#### **IHC WORKMED CLINICS**

Murray 801-288-4900

Salt Lake 801-972-8850

#### **INTERMOUNTAIN MRO**

Midvale 801-486-5400

#### **OCCUPATIONAL HEALTH CARE**

South Jordan 801-561-2777

Salt Lake 801-886-0449

Orem 801-226-0451

St. George 435-652-1285

#### **PERS**

Ogden 800-728-2482

#### **PROGRESSIVE REPORTING**

Midvale 801-566-3227

#### **ROCKY MTN. CARE CLINIC**

Salt Lake 801-975-7799

#### **TOOELE VALLEY URGENT CARE**

Tooele 435-882-3547

#### **TRANSMETRON**

Salt Lake 801-596-2709

#### **WORKFORCE QA**

Salt Lake 888-249-4575

### **SUPERVISOR TRAINING**

Persons who supervise CDL drivers are required to receive 60 minutes training on alcohol and 60 minutes training on substance abuse as required in Part 382. This required training may be obtained from a variety of sources. Contact companies listed above to see if they may offer this training.

### **CONSULTING GROUPS: SUBSTANCE ABUSE PROFESSIONAL SERVICES (SAPS)**

There are a number of government agencies and private companies which specialize in mental health and rehabilitation therapies. Make inquiries to companies listed above and ask if they offer Certified Substance Abuse Professional Services.

## Unified Carrier Registration

The Unified Carrier Registration (UCR) Act of 2005 was passed by Congress as part of the SAFTEA-LU bill. It requires all Motor Carriers, Private Motor Carriers, Leasing Companies, Freight Forwarders, and Brokers that have registered with Federal Motor Carrier Safety Administration (FMCSA) and indicated they are going to operate in "Interstate Commerce" are required to register with the UCR and pay the appropriate fee.

[http://www.naruc.org/NCSTS/documents/Subtitle\\_C\\_final\\_UCR\\_Bill\\_Section.pdf](http://www.naruc.org/NCSTS/documents/Subtitle_C_final_UCR_Bill_Section.pdf)

The UCR is an annual registration fee that runs from January 1 thru December 31<sup>st</sup>. The UCR fee is based upon the number of vehicles, (power unit only), that are rated for 10,001 lbs or more, 9 or more passengers, or transport hazardous materials in an amount requiring placards and are operated in interstate commerce as defined in CFR 390.5.

The fees may be paid online at [www.ucr.in.gov](http://www.ucr.in.gov). Click on start UCR Registration in the upper right hand corner. The following fees are current as of 2013.

| 2014 UCR Fee Bracket |             | Pay by Credit card, Debit Card or E-check. UCR FEE + Fee + Service fee equals total cost. |                |             |             |                   |                  |               |
|----------------------|-------------|---|----------------|-------------|-------------|-------------------|------------------|---------------|
| Fleet Size           | UCR Fee     | Credit Card Fee   | Debit Card Fee | E-Check Fee | Service Fee | Total Credit Card | Total Debit Card | Total E-check |
| 0-2 vehicles         | \$76.00     | \$2.75  | \$2.99         | \$1.00      | \$3.00      | \$81.57           | \$81.99          | \$80.00       |
| 3 - 5                | \$227.00    | \$5.58  | \$3.75         | \$1.00      | \$3.00      | \$235.58          | \$233.75         | \$231.00      |
| 6 - 20               | \$452.00    | \$10.05   | \$3.75         | \$1.00      | \$3.00      | \$465.05          | \$458.75         | \$456.00      |
| 21 - 100             | \$1,576.00  | \$32.42   | \$3.75         | \$1.00      | \$3.00      | \$1,611.42        | \$1,582.75       | \$1,580.00    |
| 101 - 1,000          | \$7,511.00  | \$150.53  | \$3.75         | \$1.00      | \$3.00      | \$7,664.53        | \$7,517.75       | \$7,515.00    |
| 1,001 - 200,000      | \$73,346.00 | \$1,460.65  | \$3.75         | \$1.00      | \$3.00      | \$74,809.65       | \$73,352.75      | \$73,350.00   |

Leasing Companies, Freight Forwarders and Brokers who do not operate any vehicles pay in bracket 1 0-2 vehicles. If they operate commercial vehicles the appropriate fee is to be paid based upon the number of vehicles operated in interstate commerce.

Carriers have two options in determining the number of vehicles when paying the UCR fees. They may either chose the number indicated on their more recent MCS-150 filing or the number of vehicles they operated from a 12 month period ending June 30<sup>th</sup> of the prior year.

Note: Carriers are required to maintain a list of all vehicles owned/leased and operated on UCR Form 2 or some other form that contains the required information. A separate list vehicles deemed as used exclusively in intrastate transportation and removed from the vehicle count resulting in a lower fee shall be kept on UCR Form 1. These forms may be requested by the Motor Carrier Division during an audit.

### Proof of Payment

States are not allowed to require any documentation in the vehicle to verify payment. All verification is done online line at [www.safersys.org](http://www.safersys.org).

### For Additional Information

Further information regarding the Unified Carrier Registration may be obtained at the nation registration website at [www.ucr.in.gov](http://www.ucr.in.gov), <http://www.naruc.org/NCSTS/index.cfm?pg=updates> or contact the Motor Carrier Division at (801) 965-4892 or [www.mccustomerservice@utah.gov](mailto:www.mccustomerservice@utah.gov).

## Why am I getting all these unwanted calls and solicitations since I registered my company with FMCSA?

FMCSA is aware that motor carrier officials and new entrant applicants often receive confusing or misleading solicitations from service providers or third party administrators by telephone, e-mail, text and US Mail. These businesses are able to get your company's information because when you submit an application or update your information with FMCSA, your basic carrier information is publically available. However, the services offered by these companies are neither authorized nor sanctioned by FMCSA.

### Tips to Carrier Officials

#### Telephone Solicitations:

- DO NOT give out personally identifiable information (PII) to an unknown or unverified caller!
- Make callers slow down and make sure you understand them clearly; ask questions!
- When speaking to a caller unknown to you:
- BEFORE you conduct business, ASK the caller if he or she is an FMCSA official or a duly authorized representative of the U.S. Government or
- If they are a service provider or third party administrator and VERIFY.

#### Written Solicitations:

- Read written solicitations and notices CAREFULLY!
- Do not be influenced by a fax ID line reading "DOT" or FMCSA!
- "Data lines" are easily added to any fax device and are often "spoofed."
- If a carrier or new entrant receives an e-mail, fax, text, or letter that leads them to believe they are in contact with a representative of the U.S. Government CONFIRM you are dealing with a U.S. Government Official!
- Information on FMCSA's offices is available at [www.fmcsa.dot.gov](http://www.fmcsa.dot.gov)
- Contact the FMCSA office in your state to confirm information.
- Look for small print disclaimers on solicitations or notices that state that the company is not affiliated with the U.S. Department of Transportation or FMCSA, or that state it is a private entity or company.
- **FMCSA Official and representatives DO NOT ask for banking or credit card information by telephone!**
- If a caller or a written communication indicates a service provider or third party administrator, they are not an employee or representative of the U.S. Department of Transportation or FMCSA.

#### Verification websites and phone number:

- <http://www.fmcsa.dot.gov/safety/new-entrant-safety-assurance-program>
- You may also direct questions to FMCSA's information line at 1-800-832-5660.