

ANNUAL REVIEW OF DRIVING RECORD

NAME OF DRIVER: _____

ADDRESS: _____
(Number & Street) (City) (State) (Zip Code)

SOCIAL SECURITY NUMBER: _____ DATE OF EMPLOYMENT: _____

INSTRUCTIONS TO CARRIER: Review the driving record of the employee in accordance with Section 391.25 and as outlined below. Complete the Certificate of Review as listed. Any remarks may be shown on the reverse side.

In accordance with Department of Transportation Section 391.25 a motor shall, at least once every 12 months, review the driving record of each driver it employs to determining whether that driver meets minimum requirements for safe driving or is disqualified to drive a motor vehicle pursuant to Section 391.15.

In reviewing a driving record, the motor carrier must consider any evidence that the driver has violated applicable provisions of the Federal Motor Carrier Safety Regulations and the Hazardous Materials Regulations. The motor carrier must also consider the driver's accident record and any evidence that the driver has violated laws governing the operation of motor vehicles, and must give great weight to violations, such as speeding, reckless driving, and operating while under the influence of alcohol or drugs, that indicate that the driver has exhibited a disregard for the safety of the public.

CERTIFICATE OF REVIEW

I have hereby reviewed the driving record of the above-named driver in accordance with Section 391.25 and find that:

Driver meets minimum qualifications for safe driving including Section 391.15. YES NO

If no, explain:

List action taken:

DATE
REVIEWED

PERSON WHO CONDUCTED THE ANNUAL REVIEW

REMARKS TO BE MADE ON REVERSE SIDE CONCERNING DISQUALIFICATION

(This form is constructed to meet DOT requirements per Section 391.25)

RETAIN THIS RECORD FOR THREE YEARS FROM DATE OF EXECUTION (Section 391.51(b)(5), (d)(2))