

DRIVER'S DAILY LOG

(24 HOURS)



_ / _ / _
(Month) (Day) (Year)

Original - File at home terminal
Duplicate - Driver retains in his/her possession for eight days

RECAP
Complete at end of workday.

Total Miles Driving Today:
Total Mileage Today:

Name of Carrier or Carriers: _____
Main Office Address: _____

On-duty hours today. (Total lines 3 & 4)

70 Hour/ 8 Day Drivers

Truck/Tractor and Trailer Numbers or License Plate(s) / State (show each unit): _____

Home Terminal Address: _____
I certify these entries are true and correct: _____

A. Total hours on duty last 7 days, including today.

Driver's Full Signature: _____ Co-Driver's Name: _____

B. Total hours available tomorrow. 70 hr. minus A.*

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

C. Total hours on duty last 8 days, including today.

60 Hour/ 7 Day Drivers

REMARKS: _____

A. Total hours on duty last 6 days, including today.

B. Total hours available tomorrow. 60 hr. minus A.*

C. Total hours on duty last 7 days, including today.

SHIPPING DOCUMENTS:

B/L or Manifest No. _____
or _____

Shipper & Commodity: _____

Enter name of place you reported and where released from work and when and where each change of duty occurred.



*If you took 34 consecutive hours off duty, you have 60/70 hours available again.

From: _____ To: _____
USE TIME STANDARD AT HOME TERMINAL

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ORDER NO.	WEIGHT	FROM	TO

ORDER NO.	COLLECT OR BILLED	AMOUNT COLLECTED	MAILED PAPERS FROM

CODE	STATE	LOADED	EMPTY	ROUTED NO.	FUEL PURCHASED TICKETS ATTACHED
TOTAL					

DRIVER'S VEHICLE INSPECTION REPORT

DRIVER USE <input checked="" type="checkbox"/> IF SATISFACTORY USE X IF NOT SATISFACTORY	MECHANIC USE <input checked="" type="checkbox"/> WHEN CORRECTED AND YOUR INITIALS
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TRACTOR/TRUCK NO. _____						TRAILER(S) NO.(S): _____					
D - DRIVER'S REPORT						D - DRIVER'S REPORT					
M - MECHANIC'S REPORT						M - MECHANIC'S REPORT					
Brake Lines to Trailer						Brakes					
Electric Lines to Trailer						Brake Connections					
Drive Line						Coupling Devices					
Coupling Devices						Coupling (King) Pin					
Tires, Wheels, Rims						Doors					
Suspension System						Hitch					
Body						Landing Gear					
Glass						Lights - All					
Exhaust						Roof					
Frame and Assembly						Suspension System					
Fuel System						Tarpaulin					
Cooling System						Tires					
Engine						Wheels - Rims					
Leaks						Other					
Head Lights						I MADE INSPECTION AS REQUIRED ON LISTED ITEMS.					
Tail Lights											
Stop & Turn Lights						DRIVER:					
Clearance & Marker Lights						ODOMETER END OF DAY _____					
Reflectors						ODOMETER START OF DAY _____					
Air Pressure Warning Device						TOTAL MILES DRIVEN TODAY _____					
Oil Pressure						NEXT LUBRICATION DUE AT _____ MILEAGE					
Ammeter						<input type="checkbox"/> ABOVE DEFECTS CORRECTED					
Horn						<input type="checkbox"/> ABOVE DEFECTS NEED NOT BE CORRECTED FOR SAFE OPERATION OF VEHICLE					
Windshield Wipers						MECHANIC'S SIGNATURE: _____					
Parking Brakes											
Clutch						DRIVER'S SIGNATURE: _____					
Transmission											
Rear Vision Mirror						DATE: _____					
Steering											
Service Brakes											
Speedometer											
Other Items											

DRIVER OR AGENT REPORTING: _____
COMPANY NAME: _____
ADDRESS: _____