



DRIVER'S DAILY LOG

(24 HOURS)

____/____/____
(Day) (Month) (Year)

Cycle (✓) 70 Hr./7 Day 120 Hr./14 Day

Original - File at home terminal
Duplicate - Driver retains in his/her possession for 15 days

RECAP
Complete at end of workday.

Starting Odometer _____ Ending Odometer _____ Total Distance Driven Today _____

License Plate Number(s) (show each unit) _____

Home Terminal Name and Address _____

Principal Place of Business Name and Address _____

Driver's Name _____

Name of Co-Driver _____
I certify these entries are true and correct:

Driver's Full Signature _____

Start Time (if other than midnight)	0	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	TOTAL HOURS
1. Off-duty time other than time spent in a sleeper berth																										
2. Off-duty time spent in a sleeper berth																										
3. Driving time																										
4. On-duty time other than driving time																										

REMARKS

If deferred off duty:

- Day 1
- Day 2

SHIPPING DOCUMENTS:

B/L or Manifest No. or _____

Shipper & Commodity _____

PREVIOUS 14 DAYS	DAY													
	1	2	3	4	5	6	7	8	9	10	11	12	13	14
TOTAL HOURS ON DUTY														
TOTAL HOURS OFF DUTY														

Personal Use: **664-LD**

Start ODO _____

End ODO _____

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

USE TIME STANDARD AT HOME TERMINAL

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DRIVER'S VEHICLE INSPECTION REPORT

For MB Reg. 95/2008: Veh. & Load Height/Width: _____/_____

Company Name & Address: _____

Pre-trip Time of Inspection: _____ AM/PM Odometer Reading (if equipped): _____ Location of _____

Post-trip Date: _____ Inspection: _____

Tractor/Truck Lic. No. _____ Jurisdiction: _____ Trailer(s) Lic. No. 1: _____ Jur.: _____ Lic. No. 2: _____ Jur.: _____

I declare that the vehicle(s) shown above has (have) been inspected in accordance with the applicable requirements of Schedule 1 and/or jurisdiction legislation.

No Defects Found

Inspector / Driver's Name Print _____ Inspector / Driver's Signature _____ Driver's Signature (if different from Inspector) _____

Driver (D) use an X if item is not satisfactory and indicate defect code(s). Schedule 1 Code Example: 21b = Tire Leaking 21b X Tires Repairer (R) use ✓ when corrected and your initials.

Tractor/Truck Code(s)	D	R	NSC #	Inspection Item
			13	General
			2	Cab
			6	Driver Controls
			15	Heater/Defroster
			16	Horn
			19	Steering
			7	Driver Seat
			14	Glass and Mirrors
			23	Windshield Wiper/Washer
			9	Emergency Equipment and Safety Devices
			12	Fuel Systems

Tractor/Truck Code(s)	D	R	NSC #	Inspection Item	Trailer #	1	1	2	2
Code(s)	D	R	NSC #	Inspection Item	D	R	D	R	
			1	Air Brake System					
			21	Tires					
			22	Wheels, Hubs, Fasteners					
			20	Suspension System					
			4	Coupling Devices					
			18	Lamps/Reflectors					
			5	Dangerous Goods					
			10	Exhaust System					
			11	Frame and Cargo Body					
			3	Cargo Securement					
			17	Hydraulic Brakes					
			8	Electric Brakes					

Minor/Major Defects Not Coded Above: _____

Defects En Route:

- Above defects corrected
- Above defects need not be corrected for safe operation of vehicle

Authorized Repairer's Signature _____ Date _____ Driver's Signature _____ (FMCSR 396.13) Date _____

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