



DRIVER'S DAILY LOG

(ONE CALENDAR DAY - 24 HOURS)

RECAP

DAY NO. _____

DRIVING HRS. TODAY
TOTAL LINE 3 _____

DRIVING VIOLATION TODAY _____

ON DUTY HRS. TODAY TOTAL
LINES 3 & 4 _____

70 HR/8 DAY DRIVERS

A. TOTAL HRS. ON DUTY LAST 7 DAYS, INCL. TODAY _____

B. TOTAL HRS. AVAILABLE TOMORROW 70 HRS. MINUS A _____

C. TOTAL HRS. ON DUTY LAST 8 DAYS, INCL. TODAY _____

60 HR/7 DAY DRIVERS

A. TOTAL HRS. ON DUTY LAST 6 DAYS, INCL. TODAY _____

B. TOTAL HRS. AVAILABLE TOMORROW 60 HRS. MINUS A _____

C. TOTAL HRS. ON DUTY LAST 7 DAYS, INCL. TODAY _____

(MONTH) (DAY) (YEAR)

VEHICLE NUMBERS - (SHOW EACH UNIT)

I certify these entries are true and correct:

(TOTAL MILES DRIVING TODAY)

(DRIVER'S SIGNATURE IN FULL)

(NAME OF CARRIER OR CARRIERS)

(NAME OF CO-DRIVER)

(MAIN OFFICE ADDRESS)

(HOME TERMINAL 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																									

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.

	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	HOURS
5: OFF DUTY WELL SITE																									

This line to be used only by drivers who qualify for special recording of "waiting time" at gas and oil well sites. (49 CFR 395.1(d)(2))

USE TIME STANDARD AT HOME TERMINAL

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733-LD

DRIVER'S VEHICLE INSPECTION REPORT

CARRIER'S NAME: _____

CARRIER'S ADDRESS: _____

TRACTOR/TRUCK NO.: _____

TRAILER(S) NO.(S): _____

TRACTOR/TRUCK	DRIVER'S REPORT	MECHANIC'S REPORT	TRACTOR/TRUCK	DRIVER'S REPORT	MECHANIC'S REPORT	TRACTOR/TRUCK	DRIVER'S REPORT	MECHANIC'S REPORT	TRAILER(S)	DRIVER'S REPORT	MECHANIC'S REPORT	
Brake Lines to Trailer.....			Frame & Assembly.....			Transmission.....			Brakes.....			
Electric Lines to Trailer.....			Head Lights.....			Rear Vision Mirror.....			Brake Connections.....			
Drive Line.....			Tail Lights.....			Steering.....			Coupling Devices.....			
Coupling Devices.....			Stop & Turn Lights.....			Service Brakes.....			Coupling (King) Pin.....			
Tires, Wheels, Rims.....			Clearance & Marker Lights..			Speedometer.....			Doors.....			
Suspension System.....			Reflectors.....			Other Items.....			Hitch.....			
Body.....			Air Pressure Warning Device			EMERGENCY EQUIPMENT			Landing Gear.....			
Glass.....			Oil Pressure.....				Reflective Triangles.....			Lights - All.....		
Fuel System.....			Ammeter.....				Fire Extinguisher.....			Roof.....		
Cooling System.....			Horn.....				Flags, Fusees, Reflectors....			Suspension System.....		
Engine.....			Windshield Wipers.....				Spare Bulbs, Fuses.....			Tarpaulin.....		
Leaks.....			Parking Brakes.....			Tire Chains.....			Tires.....			
Exhaust.....			Clutch.....						Wheels - Rims.....			
									Other Items.....			

I MADE INSPECTION AS REQUIRED ON LISTED ITEMS

DRIVER _____ DATE _____

DRIVER USE IF SATISFACTORY
USE X IF NOT SATISFACTORY
MECHANIC USE WHEN CORRECTED AND
YOUR INITIALS

ODOMETER END OF DAY _____
 ODOMETER START OF DAY _____
 TOTAL MILES DRIVEN TODAY _____
 NEXT LUBRICATION DUE AT _____
 MILEAGE _____

ABOVE DEFECTS CORRECTED
 ABOVE DEFECTS NEED NOT BE CORRECTED
 FOR SAFE OPERATION OF VEHICLE

DRIVER'S SIGNATURE: _____

DATE: _____

MECHANIC'S SIGNATURE: _____