

DRIVER'S DAILY LOG

ORIGINAL - File each day at home terminal

(ONE CALENDAR DAY - 24 HOURS)
Use Time Standard At Home Terminal

On-Duty Cycle
May Be Restarted
After At Least
34 Consecutive
Hours Off-Duty
Hours Worked
Last 7 Days

(MONTH) (DAY) (YEAR) (TOTAL MILEAGE TODAY)

I certify these entries are true and correct:

VEHICLE NUMBERS - (SHOW EACH UNIT)

(TOTAL MILES DRIVING TODAY)

(DRIVER'S SIGNATURE IN FULL)

BH 92 Trucking Inc.

(NAME OF CARRIER OR CARRIERS)

(NAME OF CO-DRIVER)

5912 Belmont Rd, Downers Grove, IL 60516

(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	12	TOTAL HOURS	
1: OFF DUTY																											
2: SLEEPER BERTH																											
3: DRIVING																											
4: ON DUTY (NOT DRIVING)																											
REMARKS																											

- _____
- _____
- _____
- _____
- _____
- _____
- _____
- _____

Yesterday
Total Hours

70 Hours Less
Total Hours
Equals Hours
Available
Today

Hours Worked
Today

If Hours
Worked Today
Exceeds
Hours
Available, You
Are In
Violation. Your Reason
Is To Be
Entered In
"Remarks".

B.O.L.# Or SHIPPER & COMMODITY _____
SHIPPING DOCUMENT, MANIFEST NUMBER, OR NAME OF A SHIPPER AND COMMODITY. INFORMATION REQUIRED BY SECTION 395.8(f).(12). CHECK THE TIME AND ENTER NAME OF PLACE YOU REPORTED AND WHERE RELEASED FROM WORK AND WHEN AND WHERE EACH CHANGE OF DUTY OCCURRED.

DRIVER'S VEHICLE INSPECTION REPORT

AS REQUIRED BY THE D.O.T. FEDERAL MOTOR CARRIER SAFETY REGULATIONS, I SUBMIT THE FOLLOWING:

DATE: _____ TRACTOR/TRUCK NO.: _____ TRAILER(S) NO.(S): _____

EXPLAIN DEFECT OR DEFICIENCIES

CHECK APPROPRIATE BOX

- I detect no defect or deficiency in this motor vehicle as would be likely to affect the safety of its operation or result in its mechanical breakdown.
- I detect the following defects or deficiencies in this motor vehicle as would be likely to affect the safety of its operation or result in its mechanical breakdown. **(Explain defects or deficiencies to the left ←)**

DRIVERS' SIGNATURE _____

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

MECHANIC'S SIGNATURE _____

DRIVER'S SIGNATURE _____