

# Education & Technical Assistance

Provided by:

Colorado State Patrol  
**Motor Carrier Safety Assistance Program**





## CONTENTS

- Introduction
- Forms and Supplies
- Website Information
- PART 387: Minimum Levels of Financial Responsibility for Motor Carriers
- PART 390: Federal Motor Carrier Safety Regulations: GENERAL
- PART 391: Qualification of Drivers
- PART 382: Alcohol and Drug Testing Requirements
- PART 383: Commercial Driver's License
- PART 395: Hours of Service
- PART 392: Driving of Motor Vehicles
- PART 393/396: Vehicle Maintenance
- Hazardous Materials
- Passenger Carriers
- Record Retention Schedule

# INTRODUCTION

This booklet provides basic compliance guidance to the Federal Motor Carrier Safety Regulations (FMCSRs). However, it is not intended to be a substitute for these regulations.

To access the FMCSRs, please refer to the next page for suppliers and website information.

The Colorado State Patrol Motor Carrier Safety Section is committed to improve the safe transportation of passengers and goods on the nation's highways, through a coordinated effort of Federal, State, and industry organizations to reduce fatalities, injuries, property damage and Hazardous Materials incidents.

This booklet is comprised of various parts, each containing a specific safety Regulation topic that is covered in the FMCSRs. Each part contains information sheets that cover the highlights of that section. Please feel free to reproduce any or all material in this package and to distribute copies as needed. You may also obtain this information on the FMCSA website at [www.fmcsa.dot.gov](http://www.fmcsa.dot.gov).

It is the responsibility of motor carrier operators and drivers to know and comply with all applicable FMCSRs. Safety compliance and safe operations translate into saved lives and property. We believe the information in this package, when effectively applied, will contribute to safer motor carrier operations and highways.

---

## ***Disclaimer***

*Although we make every effort to assure that the information we provide is complete and accurate it is not intended to take the place of published agency regulations. This document only paraphrases the Federal Motor Carrier Safety Regulations published in Title 49 of the U.S. Code of Federal Regulations. The contents may not be relied upon as a substitute for the official text. The regulations issued by the U.S. Department of Transportation and its Operating Administrations are published in the Federal Register and compiled in the U.S. Code of Federal Regulations (CFR). Copies of appropriate volumes of the CFR in book format may be purchased from the Superintendent of Documents, U.S. Government Printing Office, or examined at many libraries.*

---

## Useful Web Sites

Colorado State Patrol Motor Carrier Safety-

<https://www.colorado.gov/csp/mcsap>

Commercial Vehicle Size (Length and Width) Standards

CDOT permits - [www.coloradodot.info/business/permits/truckpermits](http://www.coloradodot.info/business/permits/truckpermits)

[www.ops.fhwa.dot.gov/freight/sw/overview/index.htm#2a](http://www.ops.fhwa.dot.gov/freight/sw/overview/index.htm#2a)

Company Profiles - [www.safersys.org](http://www.safersys.org)

Compliance, Safety & Accountability - <http://csa.fmcsa.dot.gov/default.aspx>

Data Q Challenge web site - [dataqs.fmcsa.dot.gov](http://dataqs.fmcsa.dot.gov)

DOT Home Page - [www.fmcsa.dot.gov/](http://www.fmcsa.dot.gov/)

Education Materials and Forms

<https://www.fmcsa.dot.gov/safety/carrier-safety/motor-carriers-guide-improving-highway-safety>

FMCSA Spanish Web Site - [www.fmcsa.dot.gov/espanol/english/index.htm](http://www.fmcsa.dot.gov/espanol/english/index.htm)

Federal Size Regulations for Commercial Motor Vehicles

[www.ops.fhwa.dot.gov/freight/publications/size\\_regs\\_final\\_rpt/index.htm](http://www.ops.fhwa.dot.gov/freight/publications/size_regs_final_rpt/index.htm)

Hazardous Materials – [phmsa.dot.gov/hazmat](http://phmsa.dot.gov/hazmat)

PSP- Pre-screening for Employee Program - [www.psp.fmcsa.dot.gov](http://www.psp.fmcsa.dot.gov)

Colorado Port of Entry web site - <https://www.colorado.gov/csp/port-entry>



## Part 387

# Minimum Levels of Financial Responsibility for Motor Carriers







# **Requirements For Financial Responsibility**

Motor carriers of property operating commercial motor vehicles in interstate, foreign, or carriers transporting hazardous materials, hazardous substances, or hazardous wastes in intrastate commerce, and for-hire carriers of passengers operating in interstate or foreign commerce must have at least the minimum amount of insurance required by law.

**Financial responsibility** means having insurance policies or surety bonds sufficient to satisfy the minimum public liability requirements.

**Public liability** means liability for bodily injury, property damage, and environmental restoration.

**Environmental restoration** means restitution for the loss, damage, or destruction of natural resources arising out of an accidental discharge of toxic or other environmentally harmful materials or liquids.

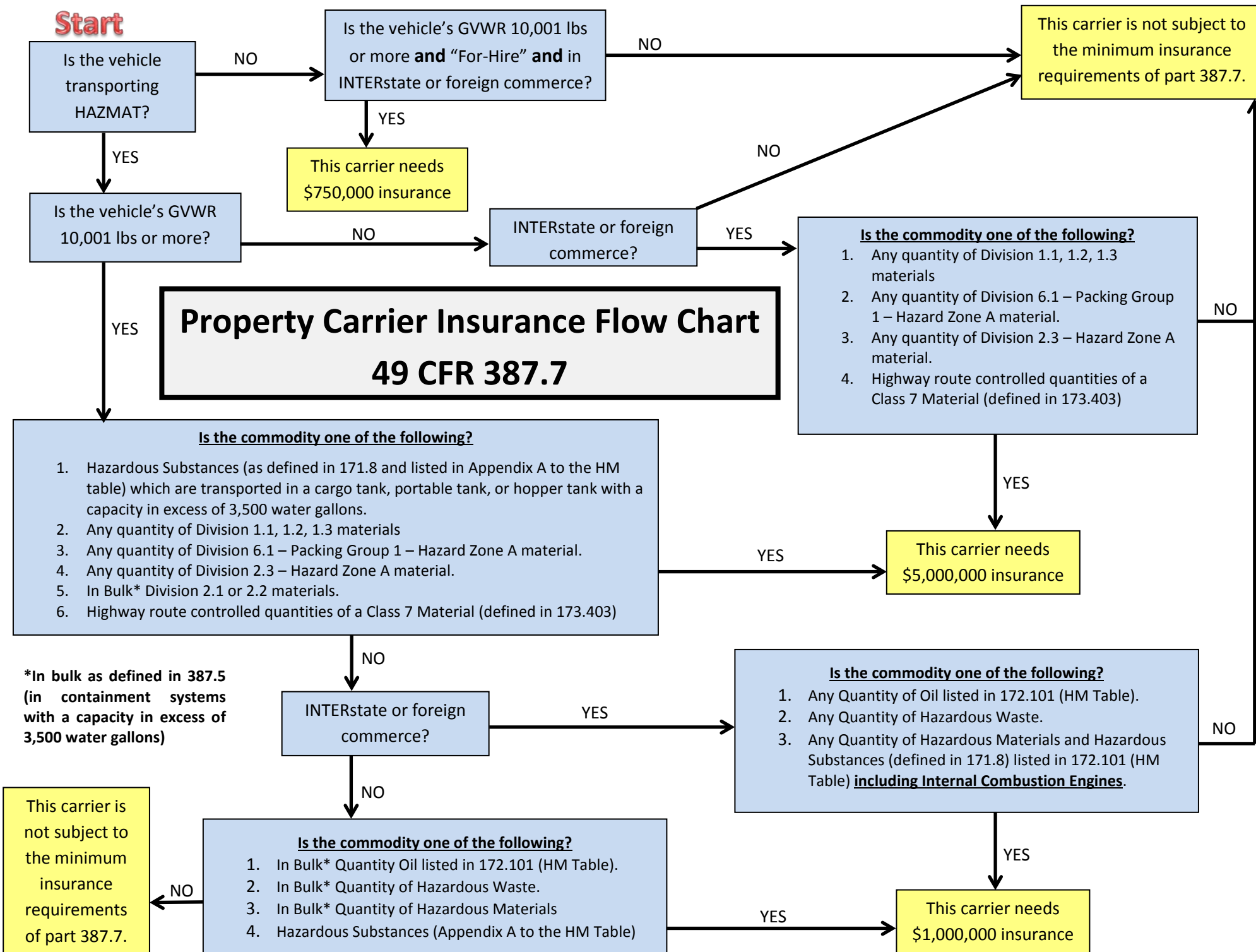
## **Proof**

The motor carrier must have proof of the minimum level of insurance at the company's principal place of business.

Proof may be shown by any of the following:

- 1) Endorsements for Motor Carriers policies of insurance for public liability under Sections 29 and 30 of the Motor Carrier Act of 1980 (Form MCS-90) issued by an insurer.
- 2) A Motor Carrier Surety Bond for public liability under Section 30 of the Motor Carrier Act of 1980 (Form MCS-82) issued by an insurer.
- 3) A written decision, order or authorization of the Federal Motor Carrier Safety Administration authorizing the motor carrier to self-insure under 49 CFR 387.309.

**Start**



**SCHEDULE OF LIMITS**  
**(Public liability)**

Type of carriage	Commodity transported	January 1, 1985
(1) For-hire (In interstate or foreign commerce, with a gross vehicle weight rating of 10,001 or more pounds).	Property (nonhazardous)	\$750,000
(2) For-hire and Private (In interstate, foreign, or intrastate commerce, with a gross vehicle weight rating of 10,001 or more pounds).	Hazardous substances, as defined in <a href="#">49 CFR 171.8</a> transported in cargo tanks, portable tanks, or hopper-type vehicles with capacities in excess of 3,500 water gallons; or in bulk Division 1.1, 1.2, and 1.3 materials, Division 2.3, Hazard Zone A, or Division 6.1, Packing Group I, Hazard Zone A material; in bulk Division 2.1 or 2.2; or highway route controlled quantities of a Class 7 material, as defined in <a href="#">49 CFR §173.403</a>	\$5,000,000
(3) For-hire and Private (In interstate or foreign commerce: in any quantity; or in intrastate commerce, in bulk only; with a gross vehicle weight rating of 10,001 or more pounds)	Oil listed in <a href="#">49 CFR 172.101</a> ; hazardous waste, hazardous materials and hazardous substances defined in <a href="#">49 CFR 171.8</a> and listed in <a href="#">49 CFR 172.101</a> , but not mentioned in (2) above or (4) below	\$1,000,000
(4) For-hire and Private (In interstate or foreign commerce, with a gross vehicle weight rating of less than 10,000 pounds).	Any quantity of Division 1.1, 1.2, or 1.3 material; any quantity of Division 2.3, Hazard Zone A, or Division 6.1, Packing Group I, Hazard Zone A material; or highway route controlled quantities of a Class 7 material as defined in <a href="#">49 CFR 173.403</a>	\$5,000,000

**SCHEDULE OF LIMITS PUBLIC LIABILITY**  
**For-Hire Motor Carriers of Passengers**  
**Operating in Interstate or Foreign Commerce**

(1) Any vehicle with a seating capacity of 16 passengers or more.	<b>\$5,000,000</b>
(2) Any vehicle with a seating capacity of 15 passengers or less.	<b>\$1,500,000</b>

Forms can be downloaded from the following website:

[http://www.fmcsa.dot.gov/documents/forms/r-l/MCS\\_90\\_508\\_final\\_508.pdf](http://www.fmcsa.dot.gov/documents/forms/r-l/MCS_90_508_final_508.pdf)

Docket Number: \_\_\_\_\_

A Federal Agency may not conduct or sponsor, and a person is not required to respond to, nor shall a person be subject to a penalty for failure to comply with a collection of information subject to the requirements of the Paperwork Reduction Act unless that collection of information displays a current valid OMB Control Number. The OMB Control Number for this information collection is 2126-0008. Public reporting for this collection of information is estimated to be approximately 2 minutes per response, including the time for reviewing instructions, gathering the data needed, and completing and reviewing the collection of information. All responses to this collection of information are mandatory. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden to: Information Collection Clearance Officer, Federal Motor Carrier Safety Administration, MC-RRA, Washington, D.C. 20590.



United States Department of Transportation  
Federal Motor Carrier Safety Administration

## Endorsement for Motor Carrier Policies of Insurance for Public Liability under Sections 29 and 30 of the Motor Carrier Act of 1980

# FORM MCS-90

Issued to \_\_\_\_\_ of \_\_\_\_\_  
(Motor Carrier name) (Motor Carrier state)

Dated at \_\_\_\_\_ on this \_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_

Amending Policy Number: \_\_\_\_\_ Effective Date: \_\_\_\_\_

Name of Insurance Company: \_\_\_\_\_

Countersigned by: \_\_\_\_\_  
(authorized company representative)

The policy to which this endorsement is attached provides primary or excess insurance, as indicated for the limits shown (check only one):

*This insurance is primary and the company shall not be liable for amounts in excess of \$\_\_\_\_\_ for each accident.*

*This insurance is excess and the company shall not be liable for amounts in excess of \$\_\_\_\_\_ for each accident in excess of the underlying limit of \$\_\_\_\_\_ for each accident.*

Whenever required by the Federal Motor Carrier Safety Administration (FMCSA), the company agrees to furnish the FMCSA a duplicate of said policy and all its endorsements. The company also agrees, upon telephone request by an authorized representative of the FMCSA, to verify that the policy is in force as of a particular date. The telephone number to call is: \_\_\_\_\_.

Cancellation of this endorsement may be effected by the company of the insured by giving (1) thirty-five (35) days notice in writing to the other party (said 35 days notice to commence from the date the notice is mailed, proof of mailing shall be sufficient proof of notice), and (2) if the insured is subject to the FMCSA's registration requirements under 49 U.S.C. 13901, by providing thirty (30) days notice to the FMCSA (said 30 days notice to commence from the date the notice is received by the FMCSA at its office in Washington, DC).

## DEFINITIONS AS USED IN THIS ENDORSEMENT

**Accident** includes continuous or repeated exposure to conditions or which results in bodily injury, property damage, or environmental damage which the insured neither expected nor intended.

**Motor Vehicle** means a land vehicle, machine, truck, tractor, trailer, or semitrailer propelled or drawn by mechanical power and used on a highway for transporting property, or any combination thereof.

**Bodily Injury** means injury to the body, sickness, or disease to any person, including death resulting from any of these.

**Property Damage** means damage to or loss of use of tangible property.

**Environmental Restoration** means restitution for the loss, damage, or destruction of natural resources arising out of the accidental discharge, dispersal, release or escape into or upon the land, atmosphere, watercourse, or body of water, of any commodity transported by a motor carrier. This shall include the cost of removal and the cost of necessary measures taken to minimize or mitigate damage to human health, the natural environment, fish, shellfish, and wildlife.

**Public Liability** means liability for bodily injury, property damage, and environmental restoration.

(continued on next page)

The insurance policy to which this endorsement is attached provides automobile liability insurance and is amended to assure compliance by the insured, within the limits stated herein, as a motor carrier of property, with Sections 29 and 30 of the Motor Carrier Act of 1980 and the rules and regulations of the Federal Motor Carrier Safety Administration (FMCSA).

In consideration of the premium stated in the policy to which this endorsement is attached, the insurer (the company) agrees to pay, within the limits of liability described herein, any final judgment recovered against the insured for public liability resulting from negligence in the operation, maintenance or use of motor vehicles subject to the financial responsibility requirements of Sections 29 and 30 of the Motor Carrier Act of 1980 regardless of whether or not each motor vehicle is specifically described in the policy and whether or not such negligence occurs on any route or in any territory authorized to be served by the insured or elsewhere. Such insurance as is afforded, for public liability, does not apply to injury to or death of the insured's employees while engaged in the course of their employment, or property transported by the insured, designated as cargo. It is understood and agreed that no condition, provision, stipulation, or limitation contained in the policy, this endorsement, or any other endorsement thereon,

or violation thereof, shall relieve the company from liability or from the payment of any final judgment, within the limits of liability herein described, irrespective of the financial condition, insolvency or bankruptcy of the insured. However, all terms, conditions, and limitations in the policy to which the endorsement is attached shall remain in full force and effect as binding between the insured and the company. The insured agrees to reimburse the company for any payment made by the company on account of any accident, claim, or suit involving a breach of the terms of the policy, and for any payment that the company would not have been obligated to make under the provisions of the policy except for the agreement contained in this endorsement.

It is further understood and agreed that, upon failure of the company to pay any final judgment recovered against the insured as provided herein, the judgment creditor may maintain an action in any court of competent jurisdiction against the company to compel such payment.

The limits of the company's liability for the amounts prescribed in this endorsement apply separately to each accident and any payment under the policy because of anyone accident shall not operate to reduce the liability of the company for the payment of final judgments resulting from any other accident.

## SCHEDULE OF LIMITS — PUBLIC LIABILITY

Type of carriage	Commodity transported	January 1, 1985
(1) For-hire (in interstate or foreign commerce, with a gross vehicle weight rating of 10,000 or more pounds).	Property (nonhazardous)	\$750,000
(2) For-hire and Private (in interstate, foreign, or intrastate commerce, with a gross vehicle weight rating of 10,000 or more pounds).	Hazardous substances, as defined in 49 CFR 171.8, transported in cargo tanks, portable tanks, or hopper-type vehicles with capacities in excess of 3,500 water gallons; or in bulk Division 1.1, 1.2, and 1.3 materials, Division 2.3, Hazard Zone A, or Division 6.1, Packing Group I, Hazard Zone A material; in bulk Division 2.1 or 2.2; or highway route controlled quantities of a Class 7 material, as defined in 49 CFR 173.403.	\$5,000,000
(3) For-hire and Private (in interstate or foreign commerce, in any quantity; or in intrastate commerce, in bulk only; with a gross vehicle weight rating of 10,000 or more pounds).	Oil listed in 49 CFR 172.101; hazardous waste, hazardous materials, and hazardous substances defined in 49 CFR 171.8 and listed in 49 CFR 172.101, but not mentioned in (2) above or (4) below.	\$1,000,000
(4) For-hire and Private (In interstate or foreign commerce, with a gross vehicle weight rating of less than 10,000 pounds).	Any quantity of Division 1.1, 1.2, or 1.3 material; any quantity of a Division 2.3, Hazard Zone A, or Division 6.1, Packing Group I, Hazard Zone A material; or highway route controlled quantities of a Class 7 material as defined in 49 CFR 173.403.	\$5,000,000

\*The schedule of limits shown does not provide coverage. The limits shown in the schedule are for information purposes only.

Docket Number: \_\_\_\_\_

A Federal Agency may not conduct or sponsor, and a person is not required to respond to, nor shall a person be subject to a penalty for failure to comply with a collection of information subject to the requirements of the Paperwork Reduction Act unless that collection of information displays a current valid OMB Control Number. The OMB Control Number for this information collection is 2126-0008. Public reporting for this collection of information is estimated to be approximately 2 minutes per response, including the time for reviewing instructions, gathering the data needed, and completing and reviewing the collection of information. All responses to this collection of information are mandatory. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden to: Information Collection Clearance Officer, Federal Motor Carrier Safety Administration, MC-RRA, Washington, D.C. 20590.



United States Department of Transportation  
**Federal Motor Carrier Safety Administration**

**Motor Carrier Public Liability Surety Bond**  
**under Sections 29 and 30 of the Motor Carrier Act of 1980**

# FORM MCS-82

## PARTIES

### SURETY COMPANY

\_\_\_\_\_  
COMPANY NAME\_\_\_\_\_  
STREET ADDRESS\_\_\_\_\_  
CITY\_\_\_\_\_  
STATE\_\_\_\_\_  
ZIP CODE\_\_\_\_\_  
TELEPHONE NUMBER*(type or print Principal Officer's name and title)*

### MOTOR CARRIER

\_\_\_\_\_  
COMPANY NAME\_\_\_\_\_  
STREET ADDRESS\_\_\_\_\_  
CITY\_\_\_\_\_  
STATE\_\_\_\_\_  
ZIP CODE\_\_\_\_\_  
TELEPHONE NUMBER*(type or print Principal Officer's name and title)*

## PURPOSE

This is an agreement between the Surety and the Principal under which the Surety, its successors and assignees, agree to be responsible for the payment of any final judgment or judgments against the Principal for public liability, property damage, and environmental restoration liability claims in the sums prescribed herein; subject to the governing provisions and the following conditions.

## GOVERNING PROVISIONS

1. Sections 29 and 30 of the Motor Carrier Act of 1980 (49 U.S.C. 13906).
2. Rules and regulations of the Federal Motor Carrier Safety Administration (FMCSA).

*(continued on next page)*

## CONDITIONS

The Principal is or intends to become a motor carrier of property subject to the applicable governing provisions relating to financial responsibility for the protection of the public.

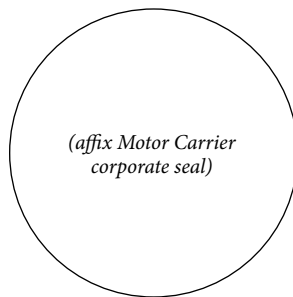
This bond assures compliance by the Principal with the applicable governing provisions, and shall insure to the benefit of any person or persons who shall recover a final judgment or judgments against the Principal for public liability, property damage, or environmental restoration liability claims (excluding injury to or death of the Principal's employees while engaged in the course of their employment, and loss of or damage to property of the principal, and the cargo transported by the Principal). If every final judgment shall be paid for such claims resulting from the negligent operation, maintenance, or use of motor vehicles in transportation subject to the applicable governing provisions, then this obligation shall be void, otherwise it will remain in full effect.

Within the limits described herein, the Surety extends to such losses regardless of whether such motor vehicles are specifically described herein and whether occurring on the route or in the territory authorized to be served by the Principal or elsewhere.

The liability of the Surety on each motor vehicle subject to the financial responsibility requirements of Sections 29 and 30 of the Motor Carrier Act of 1980 for each accident shall not exceed \$\_\_\_\_\_, and shall be a continuing one notwithstanding any recovery hereunder.

The surety agrees, upon telephone request by an authorized representative of the FMCSA, to verify that the surety bond is in force as of a particular date. The telephone number to call is \_\_\_\_\_.

This bond is effective from \_\_\_\_\_ (12:01 a.m., standard time, at the address of the Principal as stated herein) and shall continue in force until terminated as described herein. The principal or the Surety may at any time terminate this bond by giving (1) thirty-five (35) days notice in writing to the other party (said 35 day notice to commence from the date the notice is mailed, proof of mailing shall be sufficient proof of notice), and (2) if the Principal is subject to the FMCSA's registration requirements, by providing thirty (30) days notice to the FMCSA (said 30 days notice to commence from the date notice is received by the FMCSA at its office in Washington, D.C.). The Surety shall not be liable for the payment of any judgment or judgments against the Principal for public liability, property damage, or environmental restoration claims resulting from accidents which occur after the termination of this bond as described herein, but such termination shall not affect the liability of the Surety for the payment of any such judgment or judgments resulting from accidents which occur during the time the bond is in effect.



\_\_\_\_\_  
SURETY

\_\_\_\_\_  
DATE

\_\_\_\_\_  
CITY

\_\_\_\_\_  
STATE

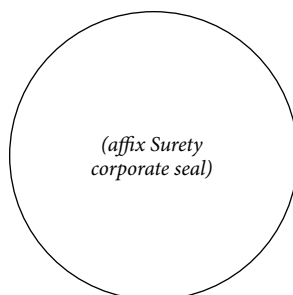
\_\_\_\_\_  
(Principal Officer's signature)

## ACKNOWLEDGMENT OF SURETY

\_\_\_\_\_  
COUNTY OF

\_\_\_\_\_  
STATE OF

On this \_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_, before me personally came \_\_\_\_\_, who, being by me duly sworn, did depose and say the he resides in \_\_\_\_\_; that he/she is \_\_\_\_\_ of the \_\_\_\_\_, the corporation described in and which executed the foregoing instrument; that he knows the seal of said corporation; that the seal affixed to said instrument is such corporate seal; that it was so affixed by order of the board of directors of said corporation; that he/she signed his/her name thereto by like order, and he/she duly acknowledged to me that he/she executed the same for and on behalf of the said corporation.



\_\_\_\_\_  
(type or print Surety Officer's name and title)

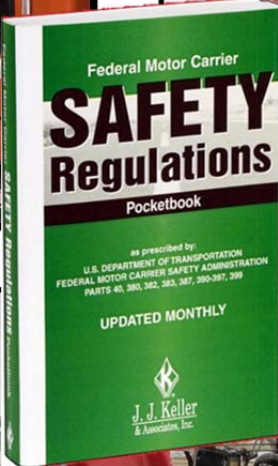
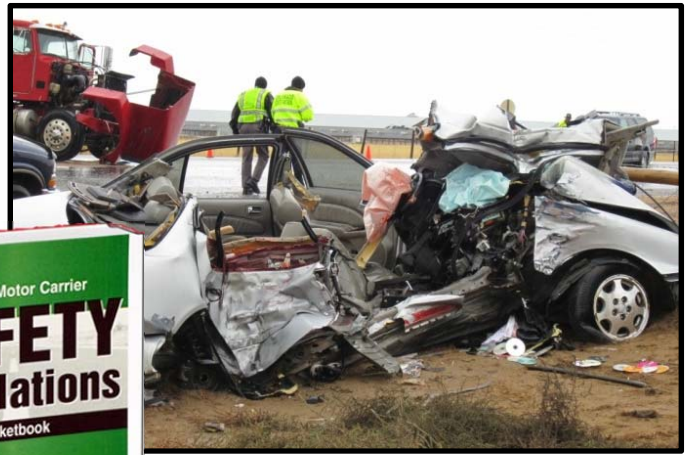
\_\_\_\_\_  
(Surety Officer's signature)

\_\_\_\_\_  
(Surety Company File Number)



# Part 390

## Motor Carrier Safety Regulations





## Part 390

### General applicability

The Federal Motor Carrier Safety Regulations (FMCSRs) apply to all employers, employees, and commercial motor vehicles transporting property or passengers in **interstate commerce**.

**Interstate commerce** means trade, traffic, or transportation in the United States—

- Between a place in a State and a place outside of such State (including a place outside of the United States); or
- Between two places in a State through another State or a place outside of the United States; or
- Between two places in a State as part of trade, traffic, or transportation originating or terminating outside the State or the United States.

**Commercial Motor Vehicle:** Any self-propelled or towed motor vehicle used on a highway in interstate commerce to transport passengers or property when the vehicle:

- Has a gross vehicle weight rating or gross combination weight rating, or gross vehicle weight or gross combination weight, of 4,536 kg **(10,001 pounds) or more**, whichever is greater; or
- Is designed or used to transport more than 8 passengers (including the driver) for compensation; or
- Is designed or used to transport more than 15 passengers, including the driver, and is not used to transport passengers for compensation; or
- Is used in transporting a quantity of hazardous material requiring placarding.

Colorado state law (C.R.S. 42-4-235) modifies, in part, the definition of a commercial vehicle which is only engaged in intrastate commerce.

**Intrastate commerce** (for a Colorado based company) means trade, traffic, or transportation which occurs entirely within Colorado.

While engaged in **intrastate commerce**, a commercial motor vehicle is defined as any self-propelled or towed vehicle:

- Bearing an Apportioned Plate
- Having a gross vehicle weight rating or gross combination weight rating of at least 16,001 lbs.; or
- Having a gross vehicle weight rating or gross combination weight rating of at least 16,001 lbs. and used to transport 16 or more passengers (including the driver), unless the vehicle is a school bus (operated in accordance with C.R.S. 42-4-1904); or
- Owned or Operated by a school district which does not have a gross vehicle weight rating of 26,001 lbs. or more so long as the school district does not receive remuneration other than reimbursement of the actual costs of operating the vehicle; or
- Designed or equipped to transport other motor vehicles from place to place by means of winches, cables, pulleys, or other equipment for towing, pulling, or lifting; or
- Used in transporting a quantity of hazardous material requiring placarding.

## **Marking Requirements** (390.21)

Every self-propelled CMV must be marked with the following information:

- The legal name or a single trade name of the motor carrier operating the self-propelled CMV.
- The identification number issued by FMCSA preceded by the letters "USDOT."

Size, shape, location, and color of marking. The marking must:

- Appear on both sides of the self-propelled CMV;
- Be in letters that contrast sharply in color with the background on which the letters are placed;
- Be readily legible, during daylight hours, from a distance of 50 feet (15.24 meters) while the CMV is stationary

Additional provisions for vehicles only engaged in **intrastate** commerce:

- Intrastate only carriers must mark their vehicles with the assigned USDOT number followed by the suffix "CO"
- Motor carriers operating in intrastate commerce, not transporting 16 or more passengers including the driver or transporting placarded hazardous materials and having a GVWR or GCWR equal to or in excess of 16,001 lbs., but not in excess of 26,000 lbs, may meet the marking requirements of 49 CFR 390.21 by marking the trailer or secondary unit, if the GVWR of the self-propelled unit is 16,000 lbs. or less.

## **CMV Accident Recording** (390.15)

For the purposes of this section, an accident is defined as an occurrence involving a commercial motor vehicle operating on a public road that results in at least one of the following:

- A fatality,
- Bodily injury to a person who, as a result of the injury, immediately receives medical treatment away from the scene of the accident,
- Disabling damage to one or more motor vehicles, requiring the vehicle(s) to be towed or otherwise transported from the scene by a tow truck or other vehicle.

For a period of three years after an accident occurs, motor carriers are required to maintain an accident register containing the following information:

- Date and place of accident,
- Driver's name,
- Number of injuries and fatalities,
- Hazardous materials (other than fuel) released, if any.

Motor carriers are also required to maintain copies of all accident reports required by State or other governmental entities or insurers for a period of one year after an accident occurs.

**Biennial Update** (390.19)

(a) **Applicability.** Each motor carrier must file the Form MCS–150 or Form MCS–150B with FMCSA before it begins operations; and every 24 months, according to the following schedule:

USDOT Number ending in:	Must file by last day of:
1	January
2	February
3	March
4	April
5	May
6	June
7	July
8	August
9	September
0	October

(3) If the next-to-last digit of its USDOT Number is odd, the motor carrier shall file its update in every odd-numbered calendar year. If the next-to-last digit of the USDOT Number is even, the motor carrier shall file its update in every even-numbered calendar year.

Biennial Update: FMCSA Home page

<https://www.fmcsa.dot.gov/registration/updating-your-registration>

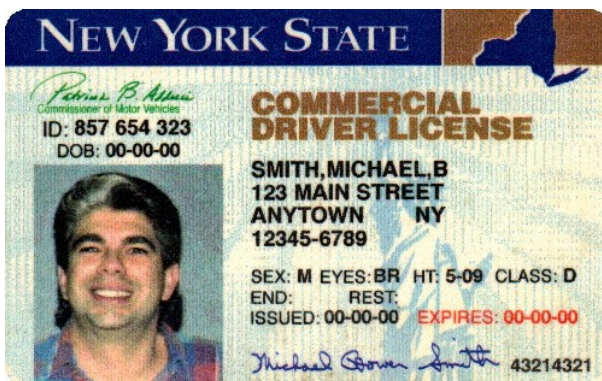
## Accident Register

**Carrier Name:** \_\_\_\_\_

[illegible]

# Qualification of Drivers

<b>Medical Examination Report</b> <b>FOR COMMERCIAL DRIVER FITNESS DETERMINATION</b>									
649-F (05/05)									
<b>1. DRIVER'S INFORMATION</b> <small>(Driver completes this section)</small>									
Driver's Name (Last, First, Middle)		Social Security No.		Birthdate M / D / Y		Age Sex (M / F)		New Certification Renewal Follow-up	
Address		City, State, Zip Code		Work Tel. ( ) Home Tel. ( )		Driver License No.		Lowercase Case: <input type="checkbox"/> A <input type="checkbox"/> B <input type="checkbox"/> C <input type="checkbox"/> D Other: <input type="checkbox"/>	
<b>2. HEALTH HISTORY</b> <small>Driver completes this section, but Medical Examiner is encouraged to discuss with driver.</small>									
<b>Yes</b> <input type="checkbox"/> <b>No</b> <input type="checkbox"/>					<b>Yes</b> <input type="checkbox"/> <b>No</b> <input type="checkbox"/>				
<input type="checkbox"/> Has doctor or doctor's assistant examined you for heart disease, stroke or blood vessel disease, including angina or infarction? <input type="checkbox"/> Yes <input type="checkbox"/> No					<input type="checkbox"/> Lung disease, emphysema, asthma, chronic bronchitis <input type="checkbox"/> Asthma disease, asthma <input type="checkbox"/> Yes <input type="checkbox"/> No				
<input type="checkbox"/> Eye disorder or impaired vision (corrective lenses), but disorders, loss of hearing or balance <input type="checkbox"/> Yes <input type="checkbox"/> No					<input type="checkbox"/> Diabetes or elevated blood sugar controlled by: <input type="checkbox"/> diet <input type="checkbox"/> pills <input type="checkbox"/> insulin				
<input type="checkbox"/> Have you ever been treated for tuberculosis, hepatitis, or other serious communicable diseases? <input type="checkbox"/> Yes <input type="checkbox"/> No					<input type="checkbox"/> Nervous or psychiatric disorders, i.e., severe depression <input type="checkbox"/> Yes <input type="checkbox"/> No				
<input type="checkbox"/> Have you ever been treated for epilepsy, convulsions, or other seizure disorders? <input type="checkbox"/> Yes <input type="checkbox"/> No					<input type="checkbox"/> Loss of, or altered consciousness <input type="checkbox"/> Yes <input type="checkbox"/> No				
<input type="checkbox"/> Have you ever been treated for alcoholism or drug abuse? <input type="checkbox"/> Yes <input type="checkbox"/> No					<input type="checkbox"/> Fainting, dizziness <input type="checkbox"/> Yes <input type="checkbox"/> No				
<input type="checkbox"/> Have you ever been treated for high blood pressure? <input type="checkbox"/> Yes <input type="checkbox"/> No					<input type="checkbox"/> Severe or persistent headache, arm, foot, leg, or hand pain <input type="checkbox"/> Yes <input type="checkbox"/> No				
<input type="checkbox"/> Have you ever been treated for diabetes? <input type="checkbox"/> Yes <input type="checkbox"/> No					<input type="checkbox"/> Have you ever been treated for heart failure? <input type="checkbox"/> Yes <input type="checkbox"/> No				
<input type="checkbox"/> Have you ever been treated for heart failure? <input type="checkbox"/> Yes <input type="checkbox"/> No					<input type="checkbox"/> Regular, frequent alcohol use <input type="checkbox"/> Yes <input type="checkbox"/> No				
For any YES answer, indicate onset date, diagnosis, treating physician's name and address, and any current limitation. List all medications (including over-the-counter medications) used regularly or recently.									
I certify that the above information is complete and true. I understand that inaccurate, false or missing information may invalidate the examination and my Medical Examiner's Certificate.									
Driver's Signature _____					Date: _____				
<b>Medical Examiner's Comments on Health History</b> (The medical examiner must review and discuss with the driver any "yes" answers and potential hazards of medications, including over-the-counter medications. The driver. This discussion must be documented below.)									







## Part 391

Motor carriers must assure that all drivers of commercial motor vehicles meet the minimum qualifications specified in Part 391.

### **Driver Requirements**

A driver must meet the following requirements:

- Be in good health and physically able to perform all duties of a driver.
- Be at least 21 years of age.
- Speak and read English well enough to converse with the general public, understand highway traffic and signals, respond to official questions, and be able to make legible entries on reports and records.
- Be able to drive the vehicle safely.
- Know how to safely load and properly block, brace, and secure the cargo.
- Have only one valid commercial motor vehicle operator's license.
- Provide an employing motor carrier with a list of all motor vehicle violations or a signed statement that driver has not been convicted of any motor vehicle violations during the past 12 months. A disqualified driver must not be allowed to drive a commercial motor vehicle for any reason.
- Pass a driver's road test or equivalent.
- Complete an application for employment.
- Possess a valid medical certificate.

# Driver File Contents Checklist

INITIAL DO FILE CONTENTS	<input type="checkbox"/>	<b>DRIVER'S APPLICATION FOR EMPLOYMENT -- Part 391.21</b>  A person will not be allowed to drive a commercial motor vehicle unless he/she has completed and signed an application for employment.
	<input type="checkbox"/>	<b>INQUIRY TO PREVIOUS EMPLOYERS -- 3 YEARS -- Part 391.23(d)</b>  An investigation of the driver's employment record during the preceding three years. This investigation must be made within 30 days of the date his/her employment begins.
	<input type="checkbox"/>	<b>INQUIRY TO STATE AGENCIES -- 3 YEARS -- Part 391.23(a)</b>  A copy of the driver's motor vehicle record during the preceeding three years.
	<input type="checkbox"/>	<b>DRIVER'S ROAD TEST CERTIFICATE OR EQUIVALENT -- Part 391.31</b>  A person must not be allowed to drive a commercial motor vehicle until he/she has successfully completed a road test and has been issued a certificate. <i>Note: A copy of the person's valid Commercial Driver's License (CDL) may be used in place of this road test pursuant to FMCSR 391.22</i>
	<input type="checkbox"/>	<b>MEDICAL EXAMINATIONS -- Part 391.41</b>  <b>For all CMV drivers</b> – All drivers must be medically certified by an examiner who is verified on the National Registry of Certified Medical Examiners website ( <a href="https://nationalregistry.fmcsa.dot.gov">https://nationalregistry.fmcsa.dot.gov</a> ). A current copy of any medical waiver or SPE certificate issued to the driver.  <b>For non-CDL vehicle drivers</b> – A legible copy of the medical examiner's certificate and a note indicating the carrier verified the medical examiner's listing on the National Registry of Certified Medical Examiners.*  <b>For CDL vehicle drivers</b> – The file must contain the Commercial Driver's License Information System (CDLIS) or Motor Vehicle Record (MVR) report showing the driver's valid medical certification status information** as well as a note indicating the carrier verified the medical examiner's listing on the National Registry of Certified Medical Examiners.
ONGOING UPDATES	<input type="checkbox"/>	<b>INQUIRY TO STATE AGENCIES -- ANNUAL -- Part 391.25(a)</b>  Request driving record at least once every 12 months for each driver.
	<input type="checkbox"/>	<b>ANNUAL REVIEW OF DRIVING RECORD -- Part 391.25(b)</b>  At least once every 12 months, the carrier must review the motor vehicle record to determine whether they still meet the minimum requirements for safe driving and is not disqualified pursuant to FMCSR 391.15. A note including the name of the person who performed this review will be retained in the file.
	<input type="checkbox"/>	<b>ANNUAL DRIVER'S CERTIFICATION OF VIOLATIONS -- Part 391.27</b>  At least once every 12 months, a motor carrier must require each driver that it employs to prepare and furnish it with a list of all violations of motor vehicle traffic laws and ordinances during the previous 12 months. Note: Drivers who have provided information required by <a href="#">Section 383.31</a> need not repeat that information in this annual list of violations.

\*Under Colorado Adoptions (CRS 42-4-235), drivers operating non-CDL type vehicles in intrastate commerce are not required to obtain and maintain a medical examiner's certification.

\*\*A carrier may use a copy of the driver's medical card for up to 15 days from the date it was issued in place of the CDLIS/MVR report)

# DRIVER APPLICATION

**Company Name:** \_\_\_\_\_

**Company Address:** \_\_\_\_\_

\_\_\_\_\_

**Applicant Name:**

**SSAN::**

**Current Address:**

**Date of Birth:**

Residence Past 3 Years

**Address:**

**City:** \_\_\_\_\_ **St.** \_\_\_\_\_ **Zip** \_\_\_\_\_ **How Long?** \_\_\_\_\_

**Address:**

**City:** \_\_\_\_\_ **St.** \_\_\_\_\_ **Zip** \_\_\_\_\_ **How Long?** \_\_\_\_\_

**Address:**

**City:** \_\_\_\_\_ **St.** \_\_\_\_\_ **Zip** \_\_\_\_\_ **How Long?** \_\_\_\_\_

Experience and Qualifications as a Driver

State	License #	Expiration Date	Type/Class (CDL A)	Endorsements

Driving Experience

Equipment Class	Type of Equipment (Van, Flat, Tank)	DATES		Approx # of Miles Total
		From	To	
Straight Truck				
Tractor Semi Trailer				
Tractor with Doubles				
Tractor with Triples				
Tractor with Tank				
Other				

Accidents/Crashes for the past 3 years or more

Date	Nature of Accident (Backing, Head-on, Rollover, Turning)	Fatalities	Injuries

Moving Traffic Convictions and Forfeitures for the past 3 years

Date	Offense	Location	Type of Motor Vehicle Operated

A. Have you ever been denied a license, permit or privilege to operate a motor vehicle ? ☐ Yes ☐ No

B. Has any license, permit or privilege ever been revoked? ☐ Yes ☐ No

If yes attach statement giving details.

This company requires all Drivers who drive Commercial Motor Vehicles (CMV) which require a Commercial Drivers License (CDL), to be controlled substances tested with a negative result prior to driving.

Do you consent to such Testing? ☐ Yes ☐ No

EMPLOYMENT RECORD

All for past 3 years and Commercial Driving Experience for the past 10 years

Last Employer: \_\_\_\_\_

Position held: \_\_\_\_\_ ☐ CDL? From: \_\_\_\_\_ To \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ ST: \_\_\_\_\_

Telephone #: \_\_\_\_\_ FAX: \_\_\_\_\_

Reason For Leaving: \_\_\_\_\_ Was the driver subject to the FMCSRs? ☐ Yes ☐ No

Last Employer: \_\_\_\_\_

Position held: \_\_\_\_\_ ☐ CDL? From: \_\_\_\_\_ To \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ ST: \_\_\_\_\_

Telephone #: \_\_\_\_\_ FAX: \_\_\_\_\_

Reason For Leaving: \_\_\_\_\_ Was the driver subject to the FMCSRs? ☐ Yes ☐ No

Last Employer: \_\_\_\_\_

Position held: \_\_\_\_\_ ☐ CDL? From: \_\_\_\_\_ To \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ ST: \_\_\_\_\_

Telephone #: \_\_\_\_\_ FAX: \_\_\_\_\_

Reason For Leaving: \_\_\_\_\_ Was the driver subject to the FMCSRs? ☐ Yes ☐ No

Last Employer: \_\_\_\_\_

Position held: \_\_\_\_\_ ☐ CDL? From: \_\_\_\_\_ To \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ ST: \_\_\_\_\_

Telephone #: \_\_\_\_\_ FAX: \_\_\_\_\_

Reason For Leaving: \_\_\_\_\_ Was the driver subject to the FMCSRs? ☐ Yes ☐ No

Last Employer: \_\_\_\_\_

Position held: \_\_\_\_\_ ☐ CDL? From: \_\_\_\_\_ To \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ ST: \_\_\_\_\_

Telephone #: \_\_\_\_\_ FAX: \_\_\_\_\_

Reason For Leaving: \_\_\_\_\_ Was the driver subject to the FMCSRs? ☐ Yes ☐ No

Last Employer: \_\_\_\_\_

Position held: \_\_\_\_\_ ☐ CDL? From: \_\_\_\_\_ To \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ ST: \_\_\_\_\_

Telephone #: \_\_\_\_\_ FAX: \_\_\_\_\_

Reason For Leaving: \_\_\_\_\_ Was the driver subject to the FMCSRs? ☐ Yes ☐ No

This certifies that this application was completed by me, and that all entries on it and information in it are true to the best of my knowledge.

Applicant's Signature \_\_\_\_\_

DATE \_\_\_\_\_

# DRIVER APPLICATION ADDENDUM

## RESIDENCE

Address: _____	St. _____	Zip _____	How Long? _____
City: _____			
Address: _____	St. _____	Zip _____	How Long? _____
City: _____			
Address: _____	St. _____	Zip _____	How Long? _____
City: _____			

## EMPLOYMENT

Last Employer: _____			
Position held: _____ [ ] CDL? From: _____ To _____			
Address: _____		City: _____	ST: _____
Telephone #: _____		FAX: _____	
Reason For Leaving: _____		Was the driver subject to the FMCSRs? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Last Employer: _____			
Position held: _____ [ ] CDL? From: _____ To _____			
Address: _____		City: _____	ST: _____
Telephone #: _____		FAX: _____	
Reason For Leaving: _____		Was the driver subject to the FMCSRs? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Last Employer: _____			
Position held: _____ [ ] CDL? From: _____ To _____			
Address: _____		City: _____	ST: _____
Telephone #: _____		FAX: _____	
Reason For Leaving: _____		Was the driver subject to the FMCSRs? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Last Employer: _____			
Position held: _____ [ ] CDL? From: _____ To _____			
Address: _____		City: _____	ST: _____
Telephone #: _____		FAX: _____	
Reason For Leaving: _____		Was the driver subject to the FMCSRs? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Last Employer: _____			
Position held: _____ [ ] CDL? From: _____ To _____			
Address: _____		City: _____	ST: _____
Telephone #: _____		FAX: _____	
Reason For Leaving: _____		Was the driver subject to the FMCSRs? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Last Employer: _____			
Position held: _____ [ ] CDL? From: _____ To _____			
Address: _____		City: _____	ST: _____
Telephone #: _____		FAX: _____	
Reason For Leaving: _____		Was the driver subject to the FMCSRs? <input type="checkbox"/> Yes <input type="checkbox"/> No	

## Previous Employer Inquiry

<b>Prospective Employer:</b> _____		
<b>Address:</b> _____		
<b>Contact Representative:</b> _____		<b>Title:</b> _____
<b>Phone #:</b> _____	<b>Fax#:</b> _____	<b>Email:</b> _____

<b>Drivers Name:</b> _____	
<b>Prior Employer</b> _____	
<b>Address:</b> _____	
<b>Phone:</b> _____	<b>Fax:</b> _____ <b>Email:</b> _____
<b>I hereby release any and all information pertaining to my employment records as required by 49 CFR Part 391.23 to the above named company. You are released from any and all liability which may result from releasing such information.</b>	
<b>Signed:</b> _____	<b>SSN:</b> _____
<b>Witness:</b> _____	<b>Date:</b> _____

**Please complete the following information as it pertains to the driver listed above.**

<b>1. Please indicate when the driver worked for your company and the nature of their employment.</b> Employed From: _____ (mo/yr) To: _____ (mo/yr) CMV Driver: <input type="checkbox"/> CDL Driver: <input type="checkbox"/> Duties: _____	
--	--

<b>2. Did the applicant have any accidents while employed with you? [ ] Yes [ ] No</b>								
Date	Time	Driver	Location City State	# Injured	# Killed	Vehicle Towed	Driver Cited	HazMat Spill

<b>3. Did the driver violate any section of 49 CFR Subpart B?</b>		
<b>Did this employee violate any of the following regulations:</b>	<b>Yes</b>	<b>No</b>
Part 382.201 Alcohol concentration above .04.		
Part 382.205 Alcohol use on duty.		
Part 382.207 Alcohol use within 4 hours before coming on duty.		
Part 382.209 Alcohol use until 8 hours after an accident.		
Part 382.211 Refusing to submit to testing (Post accident, Random, Reasonable suspicion, or Follow Up test)		
Part 382.213 Controlled substances use on duty.		
Part 382.215 Tested positive for controlled substances.		
<b>4. Part 391.23(e)(2). If you answered "yes" to any of the above items, did the employee complete the return-to-duty process according to:</b> Part 382.605/Part 40 Subpart O		

5.	<b>Part 391.23(e)(3) After completing the return-to-duty process, Part 382.605/Part 40 Subpart O, did the driver:</b>		
1. Test above .04 for alcohol	Yes	No	
2. Received a verified positive controlled substances result			
3. Refused to be tested			

Previous employer, if you answered "yes" to any item in section 3, you must also transmit a copy/copies of the appropriate documentation (e.g., CCFs, MRO results reports, BATFs, SAP reports, follow-up testing record) to the new employer. (49 CFR Section 40.25)

As per Part 391.23(g) After October 29, 2004 previous employers must respond to the above request within 30 days after the request is received.

Type of equipment driven <input type="checkbox"/> Straight truck <input type="checkbox"/> Tractor semi-trailer <input type="checkbox"/> Bus Trailer used. <input type="checkbox"/> Van <input type="checkbox"/> Flatbed <input type="checkbox"/> Refrigerated <input type="checkbox"/> Cargo Tank <input type="checkbox"/> Triples <input type="checkbox"/> Doubles
Was the applicant safe and efficient? <input type="checkbox"/> Yes <input type="checkbox"/> No
Remarks: What kind of work did applicant perform? Remarks: Was applicant's general conduct satisfactory? Remarks:

Reason for leaving your employ. ☐ Discharged ☐ Laid off ☐ Resigned ☐ Other:

How was the driver in:	EXCELLENT	GOOD	POOR
Quality of work			
Cooperation with others			
Safety Habits			
Personal Habits			
Driving Skills			
Attitude			

Comments:
-----------

Mailed On:	Faxed On:
Verified by Phone On:	
Signature:	Date:



DR 2559 (02/10/17)  
**COLORADO DEPARTMENT OF REVENUE**  
Division Of Motor Vehicles  
Driver Control Section, Room 164  
PO Box 173345  
Denver, CO 80217-3345  
[www.colorado.gov/revenue](http://www.colorado.gov/revenue)

**Search Fee \$9.00**  
**Certified fee (additional) \$1.00**

## Permission to Release Driver Records to Self or Another Person

**Driver's License offices provide only personal driving record information.  
Records and/or other requests are available only at 1881 Pierce St., Lakewood, CO**  
Pursuant to §42-1-206(1)(b)(II) (7)(a) and (7)(b)(XIII), C.R.S.

I (Please Print Last Name)		First Name	
<i>hereby authorize the release of personal information contained in records maintained by the Colorado Department of Revenue, Division of Motor Vehicles, to:</i>			
Last Name		First Name	<input type="checkbox"/> Check if to self
<i>Pursuant to the Driver's Privacy Protection Act (18 USC 2721) and Colorado law (§24-72-204, §42-1-206 (1)(b)(I)).</i>			
<b>Driver</b>			
Driver's Date of Birth		Driver's License Number	
Signature			Date
Signature of Parent or Guardian if Driver is a Minor			Date
<b>Person Receiving Record</b>			
Release Records to: Last Name		First Name	
Driver's License Number			State
Company (if applicable)			
Mailing Address			
City		State	Zip Code
<p>If your check is returned for insufficient funds or a closed account, you may not be issued or renew any type of driver's license or identification card until the original check is redeemed and an administrative and short check fee are paid.</p> <p>Under penalty of perjury, I attest that I shall not obtain, resell, transfer, or use the information in any manner prohibited by law. I understand that motor vehicle or driver records that are obtained, resold, or transferred for purposes prohibited by law may subject me to civil penalties under federal and state law. All of the information provided is true and accurate to the best of my knowledge.</p>			
Signature of Requestor			Date



## ANNUAL CERTIFICATE OF VIOLATIONS

Company: \_\_\_\_\_

Driver: \_\_\_\_\_ License : \_\_\_\_\_ State: \_\_\_\_\_

### ANNUAL CERTIFICATE OF VIOLATIONS

I certify that the following is a true and complete list of traffic violations (other than parking violations) for which I have been convicted or forfeited bond or collateral during the past 12 months.

☐ **Violations are as listed below**      ☐ **I have had no violations.**

Date of Conviction	Offense	Location	Type of Motor Vehicle operated

If no violations are listed above, I certify that I have not been convicted or forfeited bond or collateral on account of any violation required to be listed during the past 12 months.

\_\_\_\_\_  
(Date of certification)

\_\_\_\_\_  
(Driver's signature)

\_\_\_\_\_  
(Carrier Name)

\_\_\_\_\_  
(Carrier Address)

### ANNUAL REVIEW OF DRIVING RECORD

In accordance with 49 Code of Federal Regulations Section 391.25, (Federal Motor Carrier Safety Regulations), all information pertinent to the above driver's safety of operation, including the list of violations furnished by him in accordance with 49 CFR Section 391.27, has been reviewed for the past 12 months.

\_\_\_\_\_  
(Reviewed By: Signature/Date)

***Note: Get a new Motor Vehicle Report from the DMV.***

# Road Test Examination

Company Name: \_\_\_\_\_ Telephone: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Driver's Name: \_\_\_\_\_

License Number: \_\_\_\_\_ State: \_\_\_\_\_

*The road test shall be given by the motor carrier, or a person designated by the motor carrier. Any owner operator must have a road test given by another person. The test should be given by a person who is competent to evaluate and determine whether the driver who takes the test has demonstrated that he/she is capable of operating the vehicle and associated equipment that the motor carrier intends to assign to him/her. The carrier may use proper class license (copy placed in driver file), however this test is required for Triples, Tanks, and Doubles.*

Pass	Fail	<b><u>Operations Tested</u></b> (Part 391.31)
		The pre-trip inspection required by Part 392.7
		Coupling and uncoupling of combination units (if applicable)
		Placing the commercial motor vehicle in operation
		Use of the commercial motor vehicle's controls and emergency equipment
		Operating the commercial motor vehicle in traffic and while passing other motor vehicles
		Turning the commercial motor vehicle
		Braking, and slowing the commercial motor vehicle by means other than braking
		Backing and parking the commercial motor vehicle
		Other:

Examiner: (signature/date) \_\_\_\_\_

Driver (signature/date) \_\_\_\_\_

## Certification of Road Test

Driver Name: \_\_\_\_\_

Social Security Number: \_\_\_\_\_

Driver License Number/State: \_\_\_\_\_

Type of Power Unit: \_\_\_\_\_

Type of Trailer: \_\_\_\_\_

Type of Bus/Motorcoach: \_\_\_\_\_

This is to certify that the above named driver was given a road test under my supervision on \_\_\_\_\_, consisting of approximately \_\_\_\_\_ miles of driving.

It is my considered opinion that this driver possesses sufficient driving skills to operate safely the type of commercial motor vehicle listed above.

\_\_\_\_\_  
(Signature of Examiner/Title)

\_\_\_\_\_

\_\_\_\_\_  
(Organization and address of Examiner)

## CDL SELF CERTIFICATION FORM & ATTACHED MEDICAL

Federal Regulation 49 CFR 383.71 requires all CDL holders to have a DOT medical and self certification of commercial driving on file with their State Driver License Administration (SDLA). Colorado statute and rule (42-2-235 and rule 8 CCR 1507-1) requires that ALL Colorado CDL holders be medically qualified to drive a CMV by the means of a valid DOT medical or medical waiver.

**Please complete this form. Incomplete or illegible forms will be rejected.**

Individual's Name	Date of Birth	Colorado Driver's License Number
Signature		Date

This completed form can be faxed to 303-205-5709 Attn: CDL Unit or mailed to:

**Colorado Department of Revenue  
ATTN: CDL Unit Room 154  
1881 Pierce St.  
Lakewood CO 80214**

**Please mark the applicable box:**

- ☐ A. **Non-excepted Interstate** - A person must certify that he or she operates or expects to operate in interstate commerce, is both subject to and meets the qualification requirements under 49 CFR part 391 and is required to obtain a medical examiners certificate
- ☐ B. **Excepted Interstate** - A person must certify that he or she operates or expects to operate in interstate commerce, but engages exclusively in transportation or operations excepted under 49 CFR 390.3(f), 391.2, 391.68 or 398.3.
- ☐ C. **Non Excepted Intrastate** - A person must certify that he or she operates only in intrastate commerce and therefore is subject to State driver qualification requirements.
- ☐ D. **Excepted Intrastate** - A person must certify that he or she operates in intrastate commerce but engages exclusively in transportation or operations excepted from all or parts of the State Driver qualification requirements.

**PLEASE ATTACH A COPY OF  
THE DOT MEDICAL  
CERTIFICATE HERE BEFORE  
SENDING TO THE CDL UNIT/DMV**

# Part 382

## Alcohol and Drug Testing Requirements





## **Part 382**

### **Applicability**

Drivers required to have a commercial driver's license (CDL) are subject to the controlled substance and alcohol testing rules. This requirement extends to those drivers currently covered by the rule, including interstate and intrastate truck and motor coach operations.

This includes commercial motor vehicles operated by:

#### **For-hire and private companies**

- Federal, State, local, and tribal governments
- Church and civic organizations
- Apiarian industries

### **Types of alcohol and controlled substance tests**

**Pre-employment:** Part 382.301

**Post-Accident:** Part 382.303

**Random:** Part 382.305

**Reasonable Suspicion:** Part 382.307

**Return-to-Duty:** Part 382.309

**Follow-up:** Part 382.311

### **Location of Records**

All required records shall be maintained in a secure location with limited access, and shall be made available for inspection by an authorized representative of the Federal Motor Carrier Safety Administration.

### **Supervisor Training/Driver Awareness**

Each employer shall ensure that all persons designated to supervise drivers receive at least 60 minutes of training on alcohol misuse and receive at least an additional 60 minutes of training on controlled substances use. The training will be used by the supervisors to determine whether reasonable suspicion exists to require a driver to undergo testing under **Part 382.307**. The training shall include the physical, behavioral, speech, and performance indicators of probable alcohol misuse and use of controlled substances. Recurrent training for supervisory personnel is not required.

# Post-Accident Drug and Alcohol Testing Requirements

Part 382.303

Type of Accident	Was a citation issued to the CMV Driver?	Must a test be performed on the CMV driver?
Human Fatality	Yes No →	Yes Yes
Bodily injury with immediate medical treatment away from the scene of the accident	Yes No →	Yes No
Disabling damage to <u>any</u> motor vehicle requiring a tow away	Yes No →	Yes No

**Controlled Substances Test** – Controlled substance tests must be administered within 32 hours following an accident. If a test required by this section is not administered within 32 hours following the accident, the employer shall cease attempts to administer a controlled substances test, and prepare and maintain on file a record stating the reasons the test was not promptly administered. Records shall be submitted to the FMCSA upon request.

**Alcohol Tests** – Alcohol tests must be administered within 2 hours following an accident. If a required alcohol test is not administered within 2 hours following the accident, the employer shall prepare and maintain on file a record stating the reasons the test was not promptly administered. If a required alcohol test is not administered within 8 hours following the accident, the employer shall cease attempts to administer an alcohol test and shall prepare and maintain the same record. Records shall be submitted to the FMCSA upon request.



# Controlled Substances and Alcohol Testing Policy

Company: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ ST: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

This policy follows Department of Transportation and Federal Motor Carrier Safety Administration regulations found in 49 CFR Parts 40 and 382.

If you have questions about this controlled substances and alcohol testing contact \_\_\_\_\_, the designated company official to answer questions.

## **All drivers who drive commercial motor vehicles which require a CDL are subject to controlled substances and alcohol testing.**

The definition of a driver Safety Sensitive Function is found in 49 CFR Section 382.107 (attached). Safety sensitive function means all time from the time a driver begins to work or is required to be in readiness to work until the time he/she is relieved from work and all responsibility for performing work.

### **Safety sensitive function shall include:**

- (1) All time at an employer or shipper plant, terminal, facility, or other property, or on any public property, waiting to be dispatched, unless the driver has been relieved from duty by the employer;
- (2) All time inspecting equipment as required by Part 392.7 and Part 392.8 of this subchapter or otherwise inspecting, servicing, or conditioning any commercial motor vehicle at any time;
- (3) All time spent at the driving controls of a commercial motor vehicle in operation;
- (4) All time, other than driving time, in or upon any commercial motor vehicle except time spent resting in a sleeper berth (a berth conforming to the requirements of 393.76 of this subchapter);
- (5) All time repairing, obtaining assistance, or remaining in attendance upon a disabled vehicle.

**Driver conduct that is prohibited is found in 49 CFR Part 382 Subpart B.**

- (1) 382.201: No driver shall report for duty requiring the performance of a safety sensitive function with an alcohol concentration of 0.04 or greater.
- (2) 382.205: No driver shall use alcohol while performing a safety sensitive function.
- (3) 382.207: No driver shall perform a safety sensitive function within 4 hours after using alcohol.
- (4) 382.207: No driver required to take a post accident alcohol test under 49 CFR 0382.209 shall use alcohol for 8 hours following the accident.
- (5) 382.21: No driver shall refuse to submit to any required alcohol or controlled substances test.
- (6) 382.213: No driver shall report for duty requiring the performance of a safety sensitive function when the driver uses controlled substances, except when the use is pursuant to the instructions of a licensed medical practitioner, as defined in 49 CFR 0382.107. This must not interfere with the driver's ability to perform a safety sensitive function,
- (7) 382.215: No driver shall report for duty or remain on duty requiring the performance of a safety sensitive function, if the driver tests positive for controlled substances.

**The circumstances in which the driver will be tested are incorporated and found in 49 CFR Part 382 Subpart C:**

382.301: Pre-Employment Testing	382.307: Reasonable Suspicion Testing
382.303: Post Accident Testing	382.309: Return to Duty Testing
382.305: Random Testing per the prevailing rate required by U.S. DOT	382.311: Follow-Up Testing.

All definitions, regulations, and procedures used to test for controlled substances and alcohol in order to protect the integrity of the testing process, safeguard test validity, and insure results are attributed to correct driver are found in 49 CFR Parts 40 and 382. They are incorporated into this policy and are attached.

**Refusal to submit to an alcohol or controlled substances test is defined in 49 CFR 382.107.**

Refuse to submit (to an alcohol or controlled substances test) means that a driver:

- 1) Fails to appear for any test (except a Pre-employment test) within a reasonable time, as determined by the employer, consistent with applicable DOT agency regulations, after being directed to do so by the employer. This includes the failure of an employee (including an owner operator) to appear for a test when called by a C/TPA,
- 2) Fails to remain at the testing site until the testing proceeds is complete. Provided, that an employee who leaves the testing site before the testing process commences on a pre-employment test is not deemed to have refused to test,
- 3) Fails to provide a urine specimen for any drug test required by this part or DOT agency regulations. Provided, that an employee who does not provide a urine specimen, because he or she has left the testing site before the testing process commences on a pre-employment test is not deemed to have refused to test,
- 4) In the case of a directly observed or monitored collection in a drug test, fails to permit the observation or monitoring of the drivers provision of a specimen,
- 5) Fails to provide a sufficient amount of urine specimen when directed, and it has been determined that there was no adequate medical explanation for the failure,
- 6) Fails or declines to take a second test the employer or the collector has directed the driver to take,
- 7) Fails to undergo a medical examination or evaluation, as directed by the MRO as part of the verification process, or as directed by the DER under 49 CFR 40.193(d). In the case of a pre--employment drug test, the employee is deemed to have refused to test on this basis only if the pre-employment test is conducted following a contingent offer of employment,
- 8) Fails to cooperate with any part of the testing process (e.g., refuse to empty pockets when so directed by the collector, behave in a confrontational way that disrupts the collection process),
- 9) Is reported by the MRO as having a verified adulterated or substituted test result.

*Note: In reference to item 1 for the FMCSA **immediate** means that the employer shall ensure that the driver ceases to perform the safety sensitive function and proceeds to the testing site as soon as possible.*

**The consequences for violators of Subpart B are incorporated and found in 49 CFR Part 382 Subpart F.**

- (1) All CDL drivers will be removed from any safety sensitive position.
- (2) The driver must see a Substance Abuse Professional before driving again, anywhere.
- (3) The driver must take a Return To Duty test with a Negative result and/or an Alcohol test with results below .02.

**The consequences for CDL drivers tested for Alcohol with results at .02 but below .04 are that the driver will be removed from any safety sensitive position for a period of 24 hours per 49 CER Section 3 82.505(a).**

Information concerning the effects of drug use and alcohol abuse has been provided to the driver.

## COMPANY POLICY

**Any driver that violates 49 CFR Part 382 Subpart B shall be terminated for cause.**

### LIST OF SUBSTANCES ABUSE PROFESSIONALS

1. \_\_\_\_\_
2. \_\_\_\_\_
3. \_\_\_\_\_

This is to certify that I have received a copy of the company Alcohol and Controlled Substances Policy:

Driver Printed Name : \_\_\_\_\_

Signature \_\_\_\_\_

Date: \_\_\_\_\_

**Safety-sensitive function** means all time from the time a driver begins to work or is required to be in readiness to work until the time he/she is relieved from work and all responsibility for performing work. Safety-sensitive functions shall include:

- (1) All time at an employer or shipper plant, terminal, facility, or other property, or on any public property, waiting to be dispatched, unless the driver has been relieved from duty by the employer;
- (2) All time inspecting equipment as required by §~392.7 and 392.8 of this subchapter or otherwise inspecting, servicing, or conditioning any commercial motor vehicle at any time;
- (3) All time spent at the driving controls of a commercial motor vehicle in operation;
- (4) All time, other than driving time, in or upon any commercial motor vehicle except time spent resting in a sleeper berth (a berth conforming to the requirements of ~393.76 of this subchapter);
- (5) All time loading or unloading a vehicle, supervising, or assisting in the loading or unloading, attending a vehicle being loaded or unloaded, remaining in readiness to operate the vehicle, or in giving or receiving receipts for shipments loaded or unloaded; and
- (6) All time repairing, obtaining assistance, or remaining in attendance upon a disabled vehicle.



# Part 383

## Commercial Driver's License Standards







# Part 383

## **Vehicles requiring commercial driver's licenses**

Drivers must hold CDLs if they operate in interstate, intrastate, or foreign commerce and drive a vehicle:

- With a Gross Vehicle Weight Rating (GVWR) or Gross Vehicle Weight (GVW) of at least 26,001 pounds, whichever is greater, or a lesser GVWR or GVW the Secretary of Transportation prescribes by regulation, but not less than a GVWR of 10,001 pounds; or
- Designed to transport at least 16 passengers including the driver; or
- Transporting a quantity of hazardous materials requiring placarding.
- Because the CDL is a State-issued license, you should check with appropriate State officials regarding particular license classes and specific exemptions.

## **Disqualifying offenses-** Part 383.51

No employer shall knowingly allow, require, permit, or authorize a disqualified driver to drive a CMV. Disqualifying offenses include:

- Driving a CMV while under the influence of alcohol.
- Driving a CMV while under the influence of a disqualifying drug or other controlled substance.
- Leaving the scene of an accident that involves a CMV.
- Using a CMV to commit a felony.
- Using a CMV to commit serious traffic violations.
- Using a CMV to violate an Out-of-Service Order.
- Using a CMV to violate the Railroad-Highway Grade Crossing rule.

## **Endorsements –** Part 383.93

In addition to general knowledge and skills tests, drivers who operate specialized commercial motor vehicles must pass additional tests and obtain endorsements on their CDLs, as follows:

T -- Double/triple trailers (knowledge test only)

P -- Passenger (knowledge and skills tests)

N -- Tank vehicle (knowledge test only)

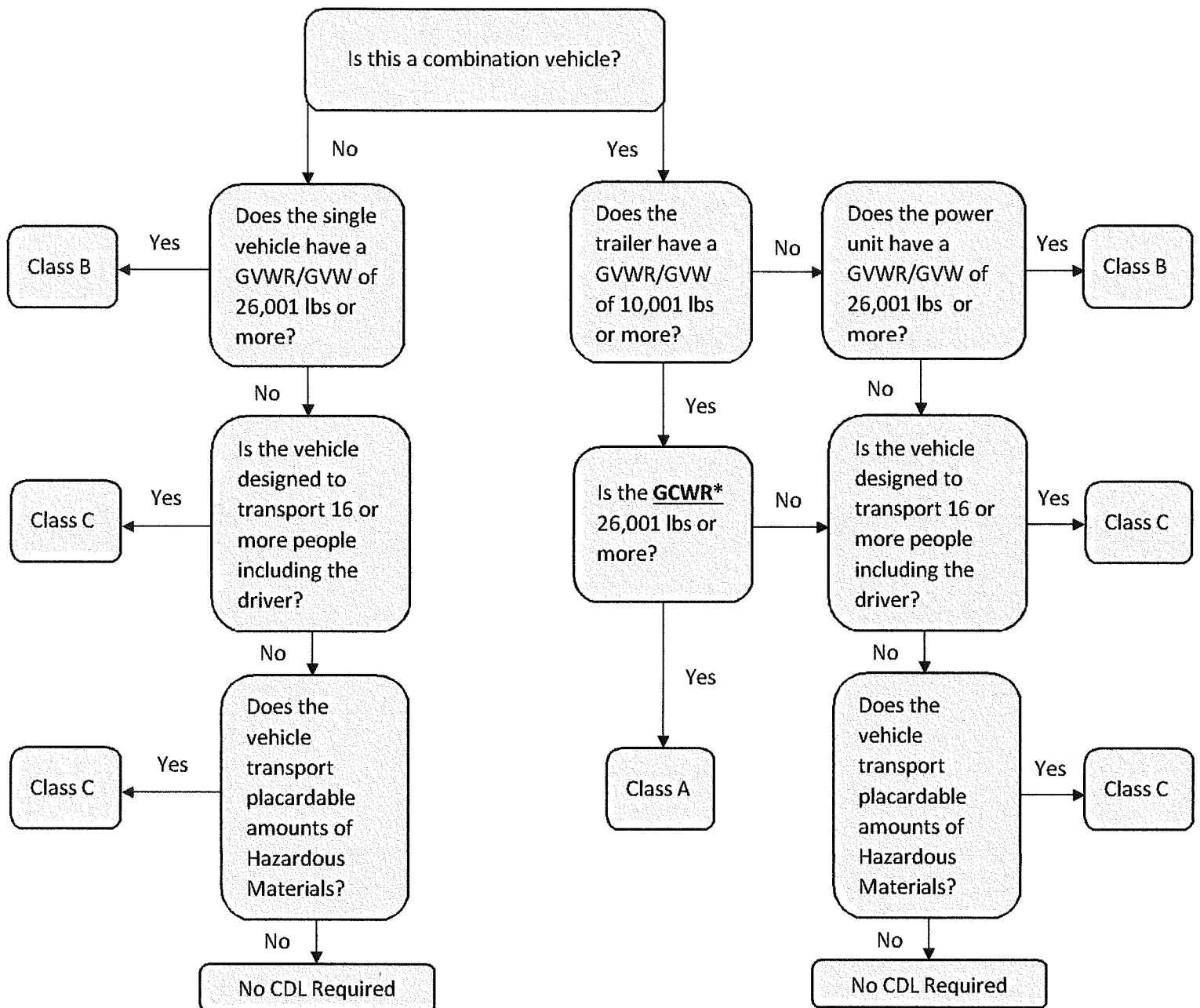
H -- Hazardous materials (knowledge test only)

X -- Combination of tank vehicle and hazardous materials (knowledge tests)

## **Restrictions** - Part 383.95

- Air Brake Restrictions
- Medical Variance Restrictions

# CDL FLOWCHART



**\*Gross combination weight rating (GCWR) is the greater of:**

- (1) A value specified by the manufacturer of the power unit, if such value is displayed on the Federal Motor Vehicle Safety Standard (FMVSS) certification label required by the National Highway Traffic Safety Administration, or
- (2) The sum of the gross vehicle weight ratings (GVWRs) or the gross vehicle weights (GVWs) of the power unit and the towed unit(s), or any combination thereof, that produces the highest value.

Exception: The GCWR of the power unit will not be used to define a commercial motor vehicle when the power unit is not towing another vehicle.

## COLORADO CLASSIFICATION SYSTEM

<u>CLASS</u>	<u>*DESCRIPTION</u>
--------------	---------------------

- |          |  |
|----------|--|
| <b>A</b> | Any combination of vehicles with a Gross Combination Weight Rating (GCWR) of 26,001 or more pounds provided the Gross Vehicle Weight Rating (GVWR) of the vehicle(s) being towed is in excess of 10,000 pounds. (Holders of a Class A license may also, with any appropriate endorsements, operate all vehicles within Class B and C). |
|----------|--|

Examples include but are not limited to:



- |          |  |
|----------|--|
| <b>B</b> | Any single vehicle with a GVWR of 26,001 or more pounds or any such vehicle towing a vehicle not in excess of 10,000 pounds GVWR. (Holders of a Class B license may also, with any appropriate endorsements, operate all vehicles within Class C). |
|----------|--|

Examples include but are not limited to:



- |          |   |
|----------|---|
| <b>C</b> | Any single vehicle less than 26,001 pounds GVWR or any such vehicle towing a vehicle not in excess of 10,000 pounds GVWR. This group applies only to vehicles, which are required to be placarded for hazardous materials or are designed to transport 16 or more persons, including the operator. A holder of a Class A, B, or C license may drive all vehicles which may be driven by a holder of a Class E or Class F license. |
|----------|---|

Examples include but are not limited to:



\*The representative vehicle for the skills test must meet the written description for that group. The examples represent, but do not fully cover, the types of vehicles falling within each group.







## Part 395

### **PROPERTY-CARRYING DRIVERS**

**11-Hour Driving Limit:** May drive a maximum of 11 hours after 10 consecutive hours off duty.

**14-Hour Limit:** May not drive beyond the 14th consecutive hour after coming on duty, following 10 consecutive hours off duty. Off-duty time does not extend the 14-hour period.

**Rest Breaks:** May drive only if 8 hours or less have passed since end of driver's last off-duty or sleeper berth period of at least 30 minutes. Does not apply to drivers using either of the short-haul exceptions in 395.1(e).

**60/70-Hour Limit:** May not drive after 60/70 hours on duty in 7/8 consecutive days. A driver may restart a 7/8 consecutive day period after taking 34 or more consecutive hours off duty

**Sleeper Berth Provision:** Drivers using the sleeper berth provision must take at least 8 consecutive hours in the sleeper berth, plus a separate 2 consecutive hours either in the sleeper berth, off duty, or any combination of the two.

Simply stated:

- Drivers may drive up to 11 hours in the 14-hour on-duty window after they come on duty following 10 or more consecutive hours off duty.
- The 14-hour on-duty window may not be extended with off-duty time for meal and fuel stops, etc.
- The prohibition on driving after being on duty 60 hours in 7 consecutive days, or 70 hours in 8 consecutive days, remains the same
- CMV drivers using the sleeper berth provision must take at least 8 consecutive hours in the sleeper berth, plus 2 consecutive hours either in the sleeper berth, off duty, or any combination of the two.

### **PASSENGER-CARRYING DRIVERS**

**10-Hour Driving Limit:** May drive a maximum of 10 hours after 8 consecutive hours off duty

**15-Hour Limit:** May not drive after having been on duty for 15 hours, following 8 consecutive hours off duty. Off-duty time is not included in the 15-hour period.

**60/70-Hour Limit:** May not drive after 60/70 hours on duty in 7/8 consecutive days.

**Sleeper Berth Provision:** Drivers using a sleeper berth must take at least 8 hours in the sleeper berth, and may split the sleeper berth time into two periods provided neither is less than 2 hours.

# Driver's Daily Log

(one calendar day - 24 hours)

SC State Transport Police

**\*\* Original copies must be submitted to the motor carrier within 13 days. \*\***

Original - Submit to carrier within 13 days

**\*\* MANDATORY \*\***  
(Month) (Day) (Year)

**\*\* MANDATORY \*\***  
(Total Miles Driving Today)

**\*\* MANDATORY \*\***  
Vehicle Numbers (Show each unit)  
**\*\* All tractor / trailer unit # 's used that day \*\***

**\*\* MANDATORY \*\***  
(Name of Carrier or carriers)

**\*\* MANDATORY \*\***  
(Driver's Signature in Full)

**\*\* MANDATORY \*\***  
(Main Office Address)

**\*\* MANDATORY \*\***  
(Name of Co-Driver)

		MID-NIGHT											MID-NIGHT											TOTAL HOURS		
		1	2	3	4	5	6	7	8	9	10	11	12	1	2	3	4	5	6	7	8	9	10	11		
1)	OFF DUTY																									* 24 Hour Total * MANDATORY
2)	SLEEPER BERTH																									
3)	DRIVING																									
4)	ON DUTY (not driving)																									
REMARKS																										TOTAL HOURS

REMARKS

The driver may include the highway, mile marker, service plaza, and/or nearest two intersecting highways. In lieu of this, the driver MUST ALWAYS record the nearest city, town, or village and state abbreviation.

**\*\* MANDATORY \*\***

Shipping Document Number(s) or name of shipper and commodity

**\* Shipping Document Numbers:** If a driver is dispatched on a trip, which is subsequently completed, and then is dispatched on another trip on that calendar day, two shipping document numbers or two shippers and commodities should be shown.



## Short Haul Provisions

### **395.1 (e)**

#### **CDL Vehicle Short Haul Exemption**

(e) *Short-haul operations*—(1) *100 air-mile radius driver*. A driver is exempt from the requirements of § 395.8 if:

- (i) The driver operates within a 100 air-mile radius of the normal work reporting location;
- (ii) The driver, except a driver-salesperson, returns to the work reporting location and is released from work within 12 consecutive hours;
- (iii)(A) A property-carrying commercial motor vehicle driver has at least 10 consecutive hours off duty separating each 12 hours on duty;
- (B) A passenger-carrying commercial motor vehicle driver has at least 8 consecutive hours off duty separating each 12 hours on duty;
- (iv)(A) A property-carrying commercial motor vehicle driver does not exceed the maximum driving time specified in §395.3(a)(3) following 10 consecutive hours off duty; or
- (B) A passenger-carrying commercial motor vehicle driver does not exceed 10 hours maximum driving time following 8 consecutive hours off duty; and
- (v) The motor carrier that employs the driver maintains and retains for a period of 6 months accurate and true time records showing:
  - (A) The time the driver reports for duty each day;
  - (B) The total number of hours the driver is on duty each day;
  - (C) The time the driver is released from duty each day; and
  - (D) The total time for the preceding 7 days in accordance with [§395.8\(j\)\(2\)](#) for drivers used for the first time or intermittently.

#### **Non-CDL Vehicle Short Haul Exemption**

(2) *Operators of property-carrying commercial motor vehicles not requiring a commercial driver's license*. Except as provided in this paragraph, a driver is exempt from the requirements of §395.3(a)(2) and §395.8 and ineligible to use the provisions of [§395.1\(e\)\(1\)](#), (g), and (o) if:

- (i) The driver operates a property-carrying commercial motor vehicle for which a commercial driver's license is not required under [part 383](#) of this subchapter;
- (ii) The driver operates within a 150 air-mile radius of the location where the driver reports to and is released from work, *i.e.*, the normal work reporting location;
- (iii) The driver returns to the normal work reporting location at the end of each duty tour;
- (iv) The driver does not drive:
  - (A) After the 14th hour after coming on duty on 5 days of any period of 7 consecutive days; and
  - (B) After the 16th hour after coming on duty on 2 days of any period of 7 consecutive days;
- (v) The motor carrier that employs the driver maintains and retains for a period of 6 months accurate and true time records showing:
  - (A) The time the driver reports for duty each day;
  - (B) The total number of hours the driver is on duty each day;
  - (C) The time the driver is released from duty each day;
  - (D) The total time for the preceding 7 days in accordance with § 395.8(j)(2) for drivers used for the first time or intermittently.

Free website for determining air mile/nautical mile radius from a principle place of business:

<http://www.mapdevelopers.com/draw-circle-tool.php>

## Employee Time Record

Driver Name: \_\_\_\_\_

[illegible]

# Part 392

## Driving of Motor Vehicles





## **Part 392**

### **Illness or fatigue** - Part 392.3

No driver is permitted to operate a motor vehicle when his/her ability and/or alertness is impaired by fatigue, illness, or any other cause that makes it unsafe to begin (or continue) to drive the vehicle.

### **Drugs** - Part 392.4

No driver may be on duty and possess, be under the influence of, or use:

- Any Schedule I drug
- Any amphetamine or formulation of an amphetamine (including pep pills and bennies)
- Narcotics or derivatives
- Any other substance that makes driving unsafe.

### **Alcohol** - Part 392.5

A driver is forbidden to consume or be under the influence of alcohol within four hours of going on duty, while on duty, or while driving. A driver is forbidden to possess an alcoholic beverage while on duty, unless it is a manifested part of the shipment.

### **Safe loading** - Part 392.9

No one may drive or require anyone to drive a commercial motor vehicle unless the cargo is properly loaded and secured.

### **Railroad crossing/stopping** - Part 392.11

Motor vehicles transporting hazardous materials, and most buses transporting passengers, are forbidden to cross railroad tracks without first stopping and looking both ways. Additionally, the driver must not shift gears while crossing the track.

### **Seat belts** - Part 392.16

A driver must not drive before correctly restraining him/herself, if the vehicle is equipped with seat belt assemblies.

### **Emergency signals for stopped vehicles** - Part 392.22

A vehicle stopped upon a highway or shoulder must activate the vehicle's hazard warning flashers at once. The driver must leave the flashers on until warning devices are activated. The flashers must again be used while the warning devices are being picked up before the vehicle moves on.

### **Placement of warning devices** - Part 392.22

The warning devices must be placed as follows (except where special rules apply):

1. One warning device must be placed on the traffic side of the vehicle, within **10 feet**, in the direction of approaching traffic.
2. A second device must be placed facing approaching traffic approximately **100 feet** away in the center of the lane or shoulder where the vehicle is stopped.
3. The third device must be placed about **100 feet** away from the stopped vehicle, in the direction away from approaching traffic.

### **Radar detectors** - Part 392.71

Use of radar detectors is prohibited, including the following:

- Radar detectors shall not be used by a driver in a commercial vehicle.
- A driver shall not operate any commercial motor vehicle that is equipped with a radar detector.
- Motor carriers shall not require or permit a driver to violate the radar detector provisions.

### **Texting** – 392.80

No driver shall engage in texting while driving. No motor carrier shall allow or require its drivers to engage in texting while driving.

**Definition:** For the purpose of this section only, driving means operating a commercial motor vehicle, with the motor running, including while temporarily stationary because of traffic, a traffic control device, or other momentary delays. Driving does not include operating a commercial motor vehicle with or without the motor running when the driver moved the vehicle to the side of, or off, a highway and halted in a location where the vehicle can safely remain stationary.

### **Using a hand-held mobile telephone** - 392.82

No driver shall use a hand-held mobile telephone while driving a CMV. No motor carrier shall allow or require its drivers to use a hand-held mobile telephone while driving a CMV.

**Definition:** For the purpose of this section only, driving means operating a commercial motor vehicle on a highway, including while temporarily stationary because of traffic, a traffic control device, or other momentary delays. Driving does not include operating a commercial motor vehicle when the driver has moved the vehicle to the side of, or off, a highway and has halted in a location where the vehicle can safely remain stationary.

# Tire Chain Requirements

***Under the Colorado Chain Law, a commercial vehicle is defined as a vehicle being used in commerce to transport passengers or property and fitting into one of the following categories:***

- Has a gross combination weight rating of 26,001 or more pounds, inclusive of a towed unit which has a gross vehicle weight rating of 10,001 or more pounds.
- Has a gross vehicle weight rating of 26,001 or more pounds.
- Is designed to transport 16 or more passengers, including the driver.

***CCR 42-4-235 Requires All Commercial Vehicles, as described above, to have Tire Chains OR approved traction devices(ATDs) in the vehicle or installed (if permanently mounted) and ready for use (ie full of sand etc..) from Sept. 1 to May 31 while on the I70 Corridor, from Dotsero (MM 133) to Golden (MM 259).***

***Colorado's CHAIN LAW REQUIRES.*** Operators of commercial motor vehicles with four or more drive wheels must have tire chains on least 4 of the drive tires when the vehicle is required to be equipped with tire chains (Except Busses). Operators of vehicles with only two drive wheels must have both drive tires chained when the vehicle is required to be equipped with tire chains.

Straight Trucks ***Are required to chain 4 drive tires.***

Vehicles in this group may use 4 tire chains; 4 AutoSocks; 4 tire cables 0.415" diameter or greater; auto chains or sanders covering 4 drive tires.



Single Drive Axle Combinations ***Are required to chain 4 drive tires.***

Vehicles in this group may use 4 tire chains; 4 AutoSocks; auto chains or sanders covering 4 drive tires.

**NO CABLES ALLOWED**



Tandem Drive Axle Combinations ***Are required to chain 4 drive tires.***

Vehicles in this group may use 4 tire chains; 4 AutoSocks; 4 tire cables 0.415" diameter or greater; auto chains or sanders covering 4 drive tires. ***IF*** there are chains on the 2 outside tires of one of the drive axles, ***any*** type of tire cable may be used to cover 2 tires on the other drive axle; AutoSocks may also be used to cover 2 tires on the other drive axle.

***AutoSocks and tire cables CAN'T be used together.***



Busses ***Are only required to cover 2 drive tires.***

Busses may use 2 tire chains, 2 tire cables 0.415" diameter or greater; 2 AutoSocks; auto chains or sanders.



Auto Transporters ***Are required to chain 4 drive tires.***

However, chains should not be used if their use would place hydraulic lines at risk of damage (ATDs may be used to mitigate the risk). Auto transporters may use 4 tire chains; 4 AutoSocks; 4 tire cables 0.415 or greater; auto chains or sanders covering 4 drive tires. **Auto Transporters may be restricted from travel if they are unable to chain due to risk of damage to hydraulic lines.**







## Part 393/396

# Parts and Accessories Necessary for Safe Operation





## **Part 393**

Every commercial motor vehicle must be equipped with certain standard equipment. Other (optional) equipment or accessories are permitted only if these items do not decrease the operational safety of the vehicle.

**Lights** – Parts 393.9 to 393.30

**Brakes** – Parts 393.40 to 393.55

**Windshield/Windows condition** – Parts 393.60 to 393.63

**Fuel Systems** – Parts 393.65 to 393.69

**Coupling Devices** – Parts 393.70 to 393.71

**Cargo Securement** – Parts 393.100 to 393.136

**Tires** – Part 393.75

**Sleeper berths** – Part 393.76

**Exhaust systems** – Part 393.83

**Rear end protection** – Part 393.86

**Seat belts** – Part 393.93

**Emergency Equipment** – Part 393.95

**Frames, Cab and Body Components, Wheels, Steering, and Suspension Systems**

**Suspension systems** – Parts 393.201 to 393.209

**Steering system** – Part 393.209

## **Part 396**

Every motor carrier, its officers, drivers, agents, representatives, and employees directly concerned with inspection or maintenance of commercial motor vehicles must comply and be conversant with these rules.

Every carrier shall systematically inspect, repair, and maintain all commercial motor vehicles under its control.

### **Recordkeeping requirements**

Motor carriers must maintain the following information for every vehicle they have controlled for 30 days or more:

- **Identifying information, including company number, make, serial number, year, and tire size**
- A schedule of inspections to be performed, including type and due date
- Inspection, repair, and maintenance records
- Records of tests conducted on buses with pushout windows, emergency doors, and marking lights.

### **Roadside inspection reports** – Part 396.23

### **Pre-trip inspection and Post-trip inspection report** – Parts 396.11 and 396.13

### **Periodic inspection** – Part 396.17

### **Inspector qualification** – Part 396.19

### **Brake inspector qualification** – Part 396.25

# Annual Vehicle Inspection Report

Vehicle History Record	
Report Number	FLEET UNIT NUMBER
DATE	

MOTOR CARRIER OPERATOR	INSPECTOR'S NAME (PRINT OR TYPE)
ADDRESS	THIS INSPECTOR MEETS THE QUALIFICATION REQUIREMENTS IN SECTION 396.19. <input type="checkbox"/> YES
CITY, STATE, ZIP CODE	VEHICLE IDENTIFICATION (✓) AND COMPLETE <input type="checkbox"/> LIC. PLATE NO. <input type="checkbox"/> VIN <input type="checkbox"/> OTHER
VEHICLE TYPE <input type="checkbox"/> TRACTOR <input type="checkbox"/> TRAILER <input type="checkbox"/> TRUCK <input type="checkbox"/> (OTHER)	INSPECTION AGENCY/LOCATION (OPTIONAL)

## VEHICLE COMPONENTS INSPECTED

ITEM	OK	NEEDS REPAIR	REPAIRED DATE	ITEM	OK	NEEDS REPAIR	REPAIRED DATE
<b>1. BRAKE SYSTEM</b>				<b>7. STEERING MECHANISM</b>			
a. Service Brakes				a. Steering Wheel Free Play			
b. Parking Brake System				b. Steering Column			
c. Brake Drums or Rotors				c. Front axle beam and ALL steering components other than steering column			
d. Brake Hose				d. Steering Gear Box			
e. Brake Tubing				e. Pitman Arm			
f. Low Pressure Warning Device				f. Power Steering			
g. Tractor Protection Valve				g. Ball and Socket Joints			
h. Air Compressor				h. Tie Rods and Drag Links			
i. Electric Brakes				i. Nuts			
j. Hydraulic Brakes				j. Steering System			
k. Vacuum Systems				<b>8. SUSPENSION</b>			
<b>2. COUPLING DEVICES</b>				a. Any U-bolt(s), spring hanger(s), or other axle positioning part(s) cracked, broken, loose or missing resulting in shifting of an axle from its normal position.			
a. Fifth Wheels				b. Spring Assembly			
b. Pintle Hooks				c. Torque, Radius, or Tracking Components			
c. Drawbar/Towbar Eye				<b>9. FRAME</b>			
d. Drawbar/Towbar Tongue				a. Frame Members			
e. Safety Devices				b. Tire and Wheel Clearance			
f. Saddle-Mounts				c. Adjustable Axle Assemblies (Sliding Subframes)			
<b>3. EXHAUST SYSTEM</b>				<b>10. TIRES</b>			
a. Any exhaust system determined to be leaking at a point forward of or directly below the driver/sleeper compartment.				a. Tires on any steering axle of a power unit.			
b. A bus exhaust system leaking or discharging to the atmosphere in violation of standards (1), (2), or (3).				b. All other tires.			
c. No part of the exhaust system of any motor vehicle shall be so located as would be likely to result in burning, charring, or damaging the electrical wiring, the fuel supply, or any combustible part of the motor vehicle.				<b>11. WHEELS AND RIMS</b>			
<b>4. FUEL SYSTEM</b>				a. Lock or Side Ring			
a. Visible leak				b. Wheels and Rims			
b. Fuel tank filler cap missing				c. Fasteners			
c. Fuel tank securely attached				d. Welds			
<b>5. LIGHTING DEVICES</b>				<b>12. WINDSHIELD GLAZING</b>			
All lighting devices and reflectors required by Section 393 shall be operable.				Requirements and exceptions as stated pertaining to any crack, discoloration or vision reducing matter (reference 393.60 for exceptions).			
<b>6. SAFE LOADING</b>				<b>13. WINDSHIELD WIPERS</b>			
a. Part(s) of vehicle or condition of loading such that the spare tire or any part of the load or dunnage can fall onto the roadway.				Any power unit that has an inoperative wiper, or missing or damaged parts that render it ineffective.			
b. Protection against shifting cargo				List any other condition which may prevent safe operation of this vehicle.			

Instructions: Mark column entries to verify inspection: X OK, X NEEDS REPAIR, NA IF ITEMS DO NOT APPLY, \_\_\_\_\_ REPAIRED DATE.  
 CERTIFICATION: THIS VEHICLE HAS PASSED ALL THE INSPECTION ITEMS FOR THE ANNUAL VEHICLE INSPECTION REPORT IN ACCORDANCE WITH 49 CFR 396.

## Inspection, Repair and Maintenance Record

The diagram illustrates the layout of a vehicle identification number (VIN) with labels: Unit Number, Year, Make, VIN, and Tire Size. The labels are positioned below a horizontal line, with vertical tick marks indicating the boundaries between the different sections of the VIN.

Vehicle Owner (if leased): \_\_\_\_\_

[illegible]

<h2 style="margin: 0;">VEHICLE IDENTIFICATION</h2>	
<div style="border-bottom: 1px solid black; height: 1.2em; margin-bottom: 5px;"></div> <div style="text-align: center; margin-bottom: 5px;"><b>MAKE</b></div> <div style="border-bottom: 1px solid black; height: 1.2em; margin-bottom: 5px;"></div> <div style="text-align: center; margin-bottom: 5px;"><b>YEAR</b></div> <div style="border-bottom: 1px solid black; height: 1.2em; margin-bottom: 5px;"></div> <div style="text-align: center;"><b>COMPANY NUMBER/OTHER I.D.</b></div>	<div style="border-bottom: 1px solid black; height: 1.2em; margin-bottom: 5px;"></div> <div style="text-align: center; margin-bottom: 5px;"><b>SERIAL NUMBER</b></div> <div style="border-bottom: 1px solid black; height: 1.2em; margin-bottom: 5px;"></div> <div style="text-align: center; margin-bottom: 5px;"><b>TIRE SIZE</b></div> <div style="border-bottom: 1px solid black; height: 1.2em; margin-bottom: 5px;"></div> <div style="text-align: center;"><b>OWNER, IF LEASED</b></div>

DATE OF INSPECTION	TYPE OF INSPECTION	MILEAGE AT TIME OF INSPECTION	DATE NEXT INSPECTION DUE	MILEAGE TYPE OF INSPECTION DUE	INSPECTION DUE

# Inspection, Repair & Maintenance Record

VEHICLE IDENTIFICATION	
_____	_____
MAKE	SERIAL NUMBER
_____	_____
YEAR	TIRE SIZE
_____	_____
COMPANY NUMBER/OTHER I.D.	OWNER, IF LEASED

DATE	OPERATION PERFORMED, INSPECTION AND/OR REPAIR



# Driver's Vehicle Inspection Report

Check ANY Defective Item and Give Details under "Remarks."

DATE: \_\_\_\_\_

TRUCK/TRACTOR NO. \_\_\_\_\_

- |  |  |  |
|--|--|--|
| <input type="checkbox"/> Air Compressor    | <input type="checkbox"/> Horn              | <input type="checkbox"/> Springs           |
| <input type="checkbox"/> Air Lines         | <input type="checkbox"/> Lights            | <input type="checkbox"/> Starter           |
| <input type="checkbox"/> Battery           | Head – Stop                                | <input type="checkbox"/> Steering          |
| <input type="checkbox"/> Brake Accessories | Tail – Dash                                | <input type="checkbox"/> Tachograph        |
| <input type="checkbox"/> Brakes            | Turn Indicators                            | <input type="checkbox"/> Tires             |
| <input type="checkbox"/> Carburetor        | <input type="checkbox"/> Mirrors           | <input type="checkbox"/> Transmission      |
| <input type="checkbox"/> Clutch            | <input type="checkbox"/> Muffler           | <input type="checkbox"/> Wheels            |
| <input type="checkbox"/> Defroster         | <input type="checkbox"/> Oil Pressure      | <input type="checkbox"/> Windows           |
| <input type="checkbox"/> Drive Line        | <input type="checkbox"/> On-Board Recorder | <input type="checkbox"/> Windshield Wipers |
| <input type="checkbox"/> Engine            | <input type="checkbox"/> Radiator          | <input type="checkbox"/> Other             |
| <input type="checkbox"/> Fifth Wheel       | <input type="checkbox"/> Rear End          |  |
| <input type="checkbox"/> Front Axle        | <input type="checkbox"/> Reflectors        |  |
| <input type="checkbox"/> Fuel Tanks        | <input type="checkbox"/> Safety Equipment  |  |
| <input type="checkbox"/> Heater            | Fire Extinguisher                          |  |
|  | Flags – Flares – Fuses                     |  |
|  | Spare Bulbs & Fuses                        |  |
|  | Spare Seal Beam                            |  |

TRAILER(S) NO (S). \_\_\_\_\_

- |  |                                       |                                    |
|--|---------------------------------------|------------------------------------|
| <input type="checkbox"/> Brake Connections   | <input type="checkbox"/> Hitch        | <input type="checkbox"/> Tarpaulin |
| <input type="checkbox"/> Brakes              | <input type="checkbox"/> Landing Gear | <input type="checkbox"/> Tires     |
| <input type="checkbox"/> Coupling Chains     | <input type="checkbox"/> Lights – All | <input type="checkbox"/> Wheels    |
| <input type="checkbox"/> Coupling (King) Pin | <input type="checkbox"/> Roof         | <input type="checkbox"/> Other     |
| <input type="checkbox"/> Doors               | <input type="checkbox"/> Springs      |                                    |

Remarks: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

- ☐ Condition of the above vehicle is satisfactory

Driver's Signature \_\_\_\_\_

- ☐ Above Defects Corrected

- ☐ Above Defects Need NOT Be Corrected For Safe Operation Of Vehicle

Mechanic's Signature \_\_\_\_\_ Date \_\_\_\_\_

Driver's Signature \_\_\_\_\_ Date \_\_\_\_\_

**Inspector Qualifications**  
Certification 49 CFR, Part 396.19

Motor carriers are responsible for ensuring that individuals(s) performing an annual DOT inspection under Part 396.19 are qualified as follows:

1. Understands the inspection criteria set forth in Part 393 and Appendix G and can identify defective components,
2. Is knowledgeable of and has mastered the methods, procedures, tools and equipment used when performing an inspection,
3. Is capable of performing an inspection by reason of experience, training, or both, and qualifies in one of the following categories (check all that apply):

- I. \_\_\_\_ Successfully completed a State or Federal training program or has a certificate(s) from a State or Canadian Province which qualifies the person to perform commercial vehicle inspections.

Specify: \_\_\_\_\_

**or**

- II. Have a combination of training or experience totaling at least one year as follows (check all that apply):

- A. \_\_\_\_ Participation in a truck manufacture-sponsored training program or similar commercial training program designed to train students in truck operation and maintenance.

Where and dates(s): \_\_\_\_\_

- B. \_\_\_\_ (years) experience as a mechanic or inspector in a motor carrier maintenance program.

Name and date(s): \_\_\_\_\_

- C. \_\_\_\_ (years) experience as a mechanic or inspector in truck maintenance at a commercial garage, fleet leasing company or similar facility.

Name of facility and date(s): \_\_\_\_\_

- D. \_\_\_\_ (years) experience as a commercial vehicle inspector for a State, Provincial, or Federal government organization.

Name, location and date(s): \_\_\_\_\_

I certify the above information is true and accurate to the best of my knowledge.

\_\_\_\_\_  
Inspector/mechanic signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Employer/supervisor signature

\_\_\_\_\_  
Date

Evidence of qualifications on file at: \_\_\_\_\_

## **Brake Inspector Qualifications**

Certification 49 CFR, Part 396.25

“Brake inspector” means any *employee* of a motor carrier who is responsible for ensuring all brake inspections, maintenance, service or repairs to any commercial motor vehicle, subject to the motor carrier’s control meet the applicable Federal standards.

No motor carrier shall require or permit any employee who does not meet minimum brake inspector qualifications to be responsible for the inspection, maintenance, service or repair of any brakes on its commercial motor vehicles.

### **Minimum Qualifications**

1. Understands and can perform brake services and inspections,
2. Is knowledgeable of and has mastered the methods, procedures, tools and equipment necessary to perform brake services and inspections,
3. Is capable of performing brake services and inspections by reason or experience, training, or both and qualifies in one of the following categories (check all that apply):

- I. \_\_\_\_ Has successfully completed an apprenticeship program sponsored or approved by a State, Canadian Province, Federal agency, labor union, or has a certificate from a State or Canadian Province which qualifies the person to perform brake services or inspections.

Specify: \_\_\_\_\_

**or**

- II. Has brake-related training or experience or a combination thereof totaling at least one year as follows (check all that apply):

- A. \_\_\_\_ Participation in a brake maintenance or inspection training program sponsored by a brake or vehicle manufacturer or similar commercial training program.

Where and date(s): \_\_\_\_\_

- B. \_\_\_\_ (years) experience performing brake maintenance or inspections in a motor carrier maintenance program.

Name and date(s): \_\_\_\_\_

- C. \_\_\_\_ (years) experience performing brake maintenance or inspection at a commercial garage, fleet leasing company or similar facility.

Name of facility and date(s): \_\_\_\_\_

I certify the above information is true and accurate to the best of my knowledge.

\_\_\_\_\_  
Inspector/mechanic signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Employer/supervisor signature

\_\_\_\_\_  
Date

Evidence of qualifications on file at: \_\_\_\_\_



# FMCSR RECORD RETENTION

## Driver Qualifications CFR 391

Regulation	Document	Retention Period
391.51 (c)	Complete driver qualification file	3 years after date of termination
391.51 (d)	Driver Applications	3 years after date of termination
391.51 (d) 4	Medical Certificate and long form	3 years from date of execution
391.51 (d) 2	Annual Review	3 years from date of execution
391.51 (d) 3	Certification of violations	3 years from date of execution
391.51 (d) 5	Physical waiver	3 years from date of execution
391.51 (d) 1	Annual motor vehicle record (MVR)	3 years from date of execution
391.23 (a) 1	Initial MVR at time of hire	3 years after date of termination

## Drug and Alcohol testing Records CFR 382

382.401 (b)(1)(i)	Records of Alcohol tests with .02 or greater result	5 years
382.401 (b)(1)(ii)	Records of driver verified positive controlled substance test results	5 years
382.401 (b)(1)(iii)	Documentation of refusals to take required alcohol and/or drug test	5 years
382.401 (b)(1)(iv)	Driver evaluations and referrals	5 years
382.401 (b)(1)(v)	Calibration documentation to testing devices	5 years
382.401 (b)(1)(vi)	Administrative records of the Alcohol controlled substance testing programs	5 years
382.401 (b)(1)(vii)	A copy of each annual calendar year summary required by 382.403(only those carriers selected)	5 years
382.401 (2)	Records relating to the alcohol and controlled substances collection process	2 years
382.401 (3)	Record of negative and cancelled controlled substance results and alcohol tests with a concentration of less than .02	1 year
382.401 (4)	Records related to the education and training of breath alcohol technicians, screening test technicians, supervisors, and drivers shall be maintained by the employer while the individual performs the functions which require the training and for *2 years after ceasing to perform these functions	Indefinite*

# FMCSR RECORD RETENTION

## Hours of Service Documentation CFR 395

395.8 (k)	Record of duty status and all supporting documents, and time records	6 months
-----------	--	----------

## Accident Records CFR 390

390.15	Accident Register and Files	3 years after the date of the accident
--------	-----------------------------	--

## Inspection and Maintenance CFR 396

396.3 (c)	Maintenance files as required by 396.3 (b)	1 year
396.9 (d)(3)(ii)	Copy of roadside inspections	12 months
396.11 (c)(2)	Driver vehicle inspection report	3 months
396.19 (b)	Annual inspector certification	During employment and 1 year thereafter