

TEXAS COMMERCIAL DRIVER LICENSE APPLICATION INTRASTATE DRIVER CERTIFICATION

NOTICE: All information on this application must be in INK.

In order to obtain a Commercial Driver License (CDL), which authorizes the operation of a commercial motor vehicle in intrastate commerce, you must certify to and meet the qualifications from Federal Rule 49 C.F.R., Part 391/390, and Texas Transportation Code, Chapter 522. If you meet these requirements, certify to Section A, B, or C below.

APPLICANT INFORMATION		
LAST NAME	FIRST NAME	
DATE OF BIRTH (mm/dd/yyyy)	DRIVER LICENSE NUMBER	
SOCIAL SECURITY NUMBER		
WHAT IS INTRASTATE COMMERCE?		
 Transportation of property (a commodity) where the point of cinternational boundary is crossed. The driver does not cross vehicle. The Bill of Lading will be an indicator as to whether a shipmed always came from and stays within the state of Texas is cone. If there is no Bill of Lading, the origin and destination of the stamples include, but are not limited to: 	estate lines or international boundaries ent or commodity is interstate or int sidered intrastate cargo. Shipment will be an indicator.	ries when operating a commercial
 School bus drivers who only transport passengers within Texas. Drivers who only transport and deliver goods to and originate from Texas addresses. 		
INSTRUCTIONS		
 Read each section carefully and certify only to the one section that applies to you. You may not certify to more than one section. If you certify to this form, you will have a restriction placed on your CDL, restricting you to intrastate commerce only. If you certify to Section A, you must choose option A or B. If you certify to Section B, you must provide a valid medical certificate. If you certify to Section C, you may choose one or both options, however the appropriate restriction(s) will be placed on your CDL. 		
CERTIFICATION		
I certify that I:		
I certify that I: a. Am at least 18 years of age, and		
I certify that I: a. Am at least 18 years of age, and b. Am not disqualified to drive a motor vehicle in any state	E ROX IE APPI ICARI E)	
I certify that I: a. Am at least 18 years of age, and	E BOX IF APPLICABLE)	
I certify that I: a. Am at least 18 years of age, and b. Am not disqualified to drive a motor vehicle in any state SECTION A. I FURTHER CERTIFY THAT I: (CHECK THE APPROPRIATE)	n intrastate commerce, not transporting a commercial motor vehicle in T	Texas prior to August 28, 1989 and
a. Am at least 18 years of age, and b. Am not disqualified to drive a motor vehicle in any state SECTION A. I FURTHER CERTIFY THAT I: (CHECK THE APPROPRIAT YES NO a. Am a driver who operates a commercial motor vehicle in materials placard, and was regularly employed operation.	n intrastate commerce, not transporting a commercial motor vehicle in Toset forth in the federal Motor of intrastate commerce, not transporting a commercial motor vehicle in Texporth in the federal Motor Carrier Saland therefore I understand that I retion Code Section 521.022. I furthe	Texas prior to August 28, 1989 and Carrier Safety Regulations, OR rting property requiring a hazardous exas prior to August 28, 1989. While Safety Regulations, I am seeking to must undergo and pass an annual per understand that I am required to
a. Am at least 18 years of age, and b. Am not disqualified to drive a motor vehicle in any state SECTION A. I FURTHER CERTIFY THAT I: (CHECK THE APPROPRIAT YES NO a. Am a driver who operates a commercial motor vehicle in materials placard, and was regularly employed operatin am not required to meet the medical standards b. Am a driver who operates a commercial motor vehicle in materials placard, and was regularly employed operatin I am not required to meet the medical standards set for obtain or maintain employment as a school bus driver physical examination as required by Texas Transporta	n intrastate commerce, not transporting a commercial motor vehicle in Toset forth in the federal Motor of intrastate commerce, not transporting a commercial motor vehicle in Textorth in the federal Motor Carrier Saland therefore I understand that I retion Code Section 521.022. I further at all times while operating a school	Texas prior to August 28, 1989 and Carrier Safety Regulations, OR rting property requiring a hazardous exas prior to August 28, 1989. While safety Regulations, I am seeking to must undergo and pass an annual er understand that I am required to old bus. ATION CATEGORY 4, EXCEPTED
a. Am at least 18 years of age, and b. Am not disqualified to drive a motor vehicle in any state SECTION A. I FURTHER CERTIFY THAT I: (CHECK THE APPROPRIAT YES NO a. Am a driver who operates a commercial motor vehicle in materials placard, and was regularly employed operating am not required to meet the medical standards b. Am a driver who operates a commercial motor vehicle in materials placard, and was regularly employed operating I am not required to meet the medical standards set for obtain or maintain employment as a school bus driver physical examination as required by Texas Transportation in the second seco	n intrastate commerce, not transporting a commercial motor vehicle in Toset forth in the federal Motor (an intrastate commerce, not transporting a commercial motor vehicle in Textorth in the federal Motor Carrier Saturd and therefore I understand that I retion Code Section 521.022. I furthe at all times while operating a school THE FEDERAL SELF-CERTIFICATION OF COMMERCIAL MOTOR VEHICLE ANSPORTATION OR OPERATION 49 C.F.R. PART 391. I FURTHER	Texas prior to August 28, 1989 and Carrier Safety Regulations, OR rting property requiring a hazardous exas prior to August 28, 1989. While Safety Regulations, I am seeking to must undergo and pass an annual er understand that I am required to bol bus. ATION CATEGORY 4, EXCEPTED EQUIRED TO BE PRESENTED FOR E IN INTRASTATE COMMERCE ONS THAT EXEMPT ME FROM

SECTION B. OR, I FURTHER CERTIFY THAT I Meet the physical qualification	tions of 49 CFR, Part 391, because I: (check all boxes that apply)		
. Do not have a loss of a foot, a leg, a hand, or an arm, or have been granted a Texas waiver;			
2. Do not have an impairment of:			
 i. A hand or finger which interferes with prehension or pow 			
	erform normal tasks associated with operating a motor vehicle; erferes with the ability to perform normal tasks associated with er;		
3. Do not have a current clinical diagnosis of myocardial infarction, cardiovascular disease of a variety known to be accompanied by	, angina pectoris, coronary insufficiency, thrombosis, or any other by syncope, dyspnea, collapse, or congestive cardiac failure;		
4. Do not have an established medical record history or clinical dia ability to control and drive a motor vehicle safely;	blished medical record history or clinical diagnosis of a respiratory dysfunction likely to interfere with my drive a motor vehicle safely;		
5. Do not have a current clinical diagnosis of high blood pressure li	re likely to interfere with my ability to operate a motor vehicle safely;		
6. Do not have an established medical history or clinical diagnosis vascular disease which interferes with my ability to control and or			
 Do not have an established medical history or clinical diagnosis consciousness or any loss of ability to control a motor vehicle; 	shed medical history or clinical diagnosis of epilepsy or any other condition which is likely to cause loss of loss of ability to control a motor vehicle;		
B. Do not have a mental, nervous, organic, or functional disease or psychiatric disorder likely to interfere with my ability to drive a motor vehicle safely;			
9. Have distant visual acuity of at least 20/40 (Snellen) in each eye without corrective lenses or visual acuity separately corrected to 20/40 (Snellen) or better with corrective lenses, distant binocular acuity of at least 20/40 (Snellen) in both eyes with or without corrective lenses, field of vision at least 70° in the horizontal Meridian in each eye, and the ability to recognize the colors of traffic signals and devices showing standard red, green, and amber; or have been granted a Texas waiver;			
by use of an audiometric device, do not have an average hearing	ess than 5 feet with or without the use of a hearing aid or, if tested ng loss in the better ear greater than 40 decibels at 55 Hz, 1,000 netric device is calibrated to American National Standard (formerly		
11. \square Do not use a Schedule I drug or other substance, an amphetam	ine, a narcotic, or any other habit forming drug; and		
12. Do not use any non-Schedule I drug or substance that is identifi is prescribed by a licensed medical practitioner, as defined in §3 advised the driver that the substance will not adversely affect th	382.107, who is familiar with the driver's medical history and has		
13. Do not have a current clinical diagnosis of alcoholism.	o divor o domy to odiory operate a commercial motor venicle,		
IF YOU HAVE CHECKED ALL THE BOXES ABOVE, THIS IDENTIFIES THAT YOU I INTRASTATE (49 C.F.R. PART 383.71(b)(1)(iii)). A MEDICAL EXAMINER'S CERTIFICA			
I CERTIFY THAT I OPERATE OR EXPECT TO OPERATE A COMMERCIAL MOTOR EXCLUSIVELY IN TRANSPORTATION OR OPERATIONS AND I AM SUBJECT TO THE THAT I HAVE READ, UNDERSTAND, AND MEET THE PRECEDING QUALIFICATIONS	E PHYSICAL QUALIFICATIONS OF 49 C.F.R. PART 391. I FURTHER CERTIFY		
APPLICANT'S SIGNATURE	DATE		
SECTION C. OR, I FURTHER CERTIFY THAT I: (CHECK THE APPROPRIA	TE BOX(ES) IF APPLICABLE)		
YES NO Am exempt from the physical provisions of 49 CFR, Part 3	391/390 as I will operate a commercial motor vehicle only in the		
following capacity. 1. The operation of a vehicle operated intrastate and used in oil or water well servicing or oil or water well drilling and which is constructed as a machine consisting, in general, of a mast, an engine for power, a draw works, and a chassis permanently constructed or assembled for such purpose.			
2. The operation of a mobile crane that is an unladen self-propelled vehicle constructed as a machine used to raise, shift, or lower weights.			
IF YOU HAVE SELECTED YES FOR SECTION C, YOU MEET THE FEDERAL SELF-CERTIFICATION CATEGORY 4, EXCEPTED INTRASTATE (49 C.F.R. PART 383.71(b) (1)(iv)). A MEDICAL EXAMINER'S CERTIFICATE IS NOT REQUIRED TO BE PRESENTED FOR THE ISSUANCE OF THIS CDL.			
I CERTIFY THAT I OPERATE OR EXPECT TO OPERATE A COMMERCIAL MOTOR VEXCLUSIVELY IN TRANSPORTATION OR OPERATIONS THAT EXEMPT ME FROM BE I FURTHER CERTIFY THAT I HAVE READ, UNDERSTAND, AND MEET THE PRECEDI	ING REQUIRED TO MEET THE MEDICAL STANDARDS OF 49 C.F.R. PART 391.		
APPLICANT'S SIGNATURE	DATE		
Sworn to and subscribed before me on this the day of _			
	Notary Public or Authorized Officer		
FOR REPARTMENT	Notary i ablic of Authorized Officer		
FOR DEPARTMENT USE ONLY			
Intrastate restriction must be placed on the license. Section C, Box 1 requires P25 – if cmv, use in oil/water well serv/drill	Optional Y – Valid Texas vision or limb waiver required Medical Examiner's certificate is required if Section B is selected. Class C - General Knowledge and any necessary endorsement exams. (e) (if applicable), Pre-trip, and any necessary endorsement exams.		