# A Texas Motor Carrier's Guide to Highway Safety

Texas Department of Public Safety





Commercial Vehicle Enforcement



Texas Highway Patrol Division Commercial Vehicle Enforcement

## PART 1 – INTRODUCTION

### Purpose

The Texas Department of Public Safety produces this pamphlet to provide basic compliance guidance to support the Federal Motor Carrier Safety Regulations (FMCSR).

Our goal is to secure the safe transportation of passengers and cargo in Texas, and ultimately on our nation's highways. As an agency, we endeavor to accomplish this objective through coordinated enforcement efforts with Federal and local agencies, safety presentations and the voluntary safety compliance of the Texas transportation industry in order to:

- Reduce commercial vehicle crashes;
- Reduce fatalities, injuries, and property losses involving commercial motor vehicles; and
- Reduce the occurrence of hazardous materials transportation incidents.

Safety compliance translates into saved lives, decreased injuries, and reduction of property loss.

## About the Contents

The majority of the sections in this pamphlet highlight information from specific parts of the FMCSRs. You may reproduce and distribute any or all of the material contained in this booklet. You may also obtain further information from the Federal Motor Carrier Safety Administration's (FMCSA) website at <u>www.fmcsa.dot.gov</u> and the Texas Administrative Rules at <u>www.sos.state.tx.us</u> (Title 37, Part 1, Chapter 4, Subchapter B).

#### Disclaimer

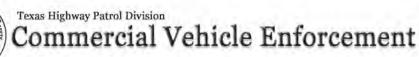
Although we made every effort to assure the completeness and accuracy of the information in this booklet, it is not intended to take the place of published agency regulations. This booklet paraphrases the FMCSR published in Title 49 of the U.S. Code of Federal Regulations. Do not use the contents as a substitute for the official text. The regulations issued by the U.S. Department of Transportation (USDOT) and its operating administrations are published in the Federal Register and compiled in the U.S. Code of Federal Regulations. Likewise, Texas Motor Carrier Safety Regulations are published under 37 TEX. ADMIN. CODE, Chapter 4, and are subject to changes as may be published from time to time in the Texas Register.

Motor carriers, drivers, and shippers are responsible for understanding and complying with the Federal Motor Carrier Safety Regulations (FMCSRs) and Texas Regulations.



Captain Omar Villarreal Manager, Motor Carrier Bureau

## NOTESÁ



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Texas Highway Patrol Division Commercial Vehicle Enforcement

## Texas Administrative CodeÁ

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Source Note: The provisions of this §4.1 adopted to be effective March 9, 2004, 29 TexReg 2376; amended to be effective August 31, 2004, 29 TexReg 8375; amended to be effective January 4, 2005, 29 TexReg 12235; amended to be effective May 22, 2005, 30 TexReg 3030; amended to be effective September 22, 2005, 30 TexReg 6064; amended to be effective January 24, 2006, 31 TexReg 404; amended to be effective May 30, 2006, 31 TexReg 404; amended to be effective January 28, 2007, 32 TexReg 245; amended to be effective April 30, 2007, 32 TexReg 2370; amended to be effective August 16, 2007, 32 TexReg 5033; amended to be effective January 2, 2008, 32 TexReg 10056; amended to be effective June 11, 2008, 33 TexReg 4527; amended to be effective December 10, 2008, 33 TexReg 10048; amended to be effective February 25, 2010, 35 TexReg 1470; amended to be effective November 8, 2010, 35 TexReg 9918; amended to be effective June 26, 2012, 37 TexReg 4601; amended to be effective July 6, 2014, 39 TexReg 5190; amended to be effective October 21, 2015, 40 TexReg 7245; amended to be effective May 9, 2016, 41 TexReg 3314

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- ÇEDc@Á!^●][}•ãàājāãâ'•Áāj][•^åÁ;}Áæék]{ { { ^}&ãæ¢Á'[ [ dː Åç^@ãk]^©Áj] / ǽ[ Åå[ Áj] cÁāj ] æãÁœê { ] [ •^kÅ [ ] ^¦æɛ[ \€Áæàājãĉ Áʒ[ Áj] ^¦æɛ^ÁœAç^@ãk]^Á æ^]^L
- ÇD&[{ { ^\&@eqk}^@eqk}^{[d] ^\@eqk}^A; ]^\@eqk}^A; ]^\@eqk}^A;
- ý Do@ Á, ā,ā, `,À,•¦^,`,À, a; æ; Å, á,a; æ; A, a; a; a; a; a; a; b; a; b
- ÇaDÔ^¦œæjÁc^¦{ ÊÁ, @}}Á`•^åÁġÁc@Á^å^¦æ¢l/[[d]¦Á&æ4'å\*¦ð\*¦ð\*æ^čÁ/\*\* [ææqi} Áæe Áæð[] c^åÁġ •`à•^&cqi} Å ÇædAţÁ Ác@árÁ^&cqi} ÊÉ@æç^Ác@Át[||[] 引\*Át ^æ) 引\*•Êá`} |^••Ác@Á&[} c^¢cA&|^æ|^ 引 å ã&æe\*•Át c@-¦, ã\*^K
  - ÇFDT [d; ¦Á&æd; â\;ÁËÁPæe Ác@:Á(^æ); ã; \* Áæe•ãt }^åÁà^Á\/¢æe ÁV; æ); [; [ææaā]; } ÁÔ[å^Ê hî I HÈE€FÇî DÁ, @} Áç^@&k|/•Á[]^; æe^åÁà^Ác@:Á([d; ¦Á&æd; â\;Á(^^oÁc@:Áæ];] |ã&æàājãĉ ¦^``ã^{ ^} • Á[, Á`à•^&cā]; } ÁÇ&DÁ; Ás@ã:Á^&cā]; È

  - ÇDÖ^]ælq(^}oÆÄ√@Á√¢ænÄÖ^]ælq(^}of(AŰ`à|æAÛæ^cÈÈ
  - ý DÖā^&q ¦Á¤Áv@Áåā^&q ¦Á, ÁœÁ/^¢æÁÖ^] ælq ^} ơf, ÁÚ`à|ã&ÁÙæ^ĉ Á, ¦ÁœÁå^•ã }^^Á, Áœ åā^&q ¦È

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  - ĢF∈DOE\*¦&&`|覿‡Á&[{ { [åãĉÁEAPæ•Ác@•Á(^æ);ā]\*Áæ•Áå^āj^åA³,āAājáVã‡h^ÁIJÊAÔ[å^Á[-ÁØ^å^¦æ‡ Ü^\*`|ææāj}•ÁhHUÍÈEÁæ);åÁāj&|ĭå^•Á,[[åÁ&@ãj•È
  - ÇFFDÚ|æ);cīj,\*Áæ);åÁ@æs¦ç^∙cīj,\*Á\*^æ•[}•ÁÄÄQE^ÁRæ),čæ^^ÁFÁ{[ÁÖ^&^{ à^\Á+FÈ
  - ĢFGDÚ¦[å`&^¦ÁÉŹŒÁ]^\!•[}Á^}\*æt^åÁðJÁc@Áà`•ðJ^••Á[-Á]¦[å`&ðJ\*Á[¦Á&æč•ðJ\*Á[Áà^Á]¦[å`&^å -{¦Á&[{ { ^\&ãæhÁ]`}][•^•Áæ)Áæt¦3&`|č'¦æhÁ&[{ { [åãĉÈĂV@Ác^\{ ÁðJ&]`å^•Ác@Á[,}}^\¦Á[~ æÁ-æd{ Á[}Á, @3&@Ác@Á&[{ { [åãĉÁã\*Á]¦[å`&^åÁæ)åÁc@Á[,}}^\©Ác^}æ)cÁ[¦ •@ed-^&¦[]]^¦È
  - ĢFHDU~-Ë[æåÁ[[d[¦ã^åÁ&[]+d`&cā]}Á``ā]{^}oÁËÁQ&|`å^•Áà`óÆÂ][oÁjā]ãe^åÁ{[ÊÁ[[d[¦scrapers àæ&\@]^•ÊÁ[[d[¦Á\*¦æå^¦•ÊÁ&[{]æ&d[!+ÊÁ^¢&æçæa[!+ÊÁdæ&d[+EÁd^}&@]+Êà`||å[:^!+ÊÁæ)åÁ [c@!Å•ã]āæÁ^``ā]{^}oÁ![`cā]^|^Á-[`}åÁæA&[]+d`&cā]}Å•ãe^AAæ]åác@æcā;A[&&ææā]}æ|^Á {[ç^åÁd[Á[¦Á+][{Á&[]+d`&cā]}Á+āe^AAA[]^!æå]\*Ác@A^``ā]{^}oÁ;@];cåã;cæ)&^+A[]A {[ç^åÁd[Á[¦Á+][{Á&[]+d`&cā]}Á+ãe^AAâA[]^!æå]\*Ác@A^``ā]{^}oÁ;@];cåã;cæ)&^+A[]A ]`à|ã&A@āt@]æê+ÈÁU~-Ë[æåA{[[d[¦ã^åAÂ&[]+d`&cā]}ÁA``ă]{^}oAã;A][cå^+â]^àAád;Aa []^!æe^Aá]Ádæ-ã&Aæ)åÅ+ &@Aæ]]^ææa)&^A[]AæAâ]`à]ã&A@āt@]æâAã;A[]|^ā]&ãå^}aAád;Aa ]¦ā]æâ^A~}&cā]}+ÈAU~-Ë[æåA{[[d[¦ã^åA&]]+d`&cā]}A^``ā]{^}oAã;A][c&[}+ãa^Aád;Aa ]'ā]æAá]

§644.001.

- (FID V@Á] @æ•^ÁÄ/@Á&[{ { ^\&ãad4Åå\ãç^\©Á|ã&\}•^Á\^`ă^{ ^} ð\* á^{ ^} o\*Á[ Á] æbÁHÌ HÁ[ Áco@á •`à&@æ] &\Ä&æe Á •^å/áJ Á/ãd/Å JÊÔ[ å^Á[ ÁØ^å^\æ4Å] \*`|ææā[ } •ÊħHÌ ŒÈ€HÇæ40, FĎÁ @æ4Å[ { ^æ c@Á&[ { { ^\&ãæd4Åå\ãç^\©Á|ã&\}•^Á\^``ã^{ ^} o\*Á[ ÁV^¢æ ÁV\æ]•] [ \cæaā[ } ÁÔ[ å^ÊÂÔ@æ] &\ í GOÈ
- (ŢFÍD Q[ ¦Á] ` ¦] [ ^• Á[ ~Á!^{ [ çæ‡Á+[ { Á•æ^c ĉ Ё^} •ããţ^A´ } & cāţ } Á+[ ¦Á] ¦[ @ãaãc^åA&[ } å` & oÁæ å^• & að^åAġ Á/ãţ^A Í JÊĆ[ å^Á[ ~Á2^å^!æ‡Ű'\* |ææ‡] • ÊÉÚæłoĤ DĚ €FÇ&DĚ&[ { { ^!&ãæ‡Á ( [ d ¦ ç^@3&|^Á{ ^æ} • Áæ4ç^@3&|^Á\*`àb & oÁd[ Ác@ Á!^``ã^{ ^} œ Á[ ~ÁV^¢æ ÁV!æ] •] [ !cææ‡] } ÁÔ[ å^Ê Ô@æ‡] c^¦Á[ CGÁæ) å Áæ4ç^@3&|^Á\*`àb & oÁd[ Án IÈGA[ ~Ác@ãa Áãţ / ÁÇ^|ææ‡] \* Ád[ ÁÔ[ } dæ&oÓæ lãk]• Á[ ~ Ô^!cæ‡] ÁÚæ •^} \*^!•DÉĂġ Áæååãa‡] Ád[ Ác@] •^Áç^@3&|^•Á^} ` { ^!æe^åÅå} ÁVãţ^AI JÊÁÔ[ å^Á[ ~ Ø^å^!æ#ÂÜ^\* ` |ææ‡] } •ÊÁÚæłoÁHÌ GĚ €FÇ&DÈ

## (& DOE] ] | a& aaa a aa â Ê

- (FDV@ÁØTÔÙŒÁ^\*č|æeāi} Ásch Ásch] | ﷺ (أَيْنَا اللَّهُ اللَّهُ اللَّهُ الْعَلَى اللَّهُ الْعَلَى [ - As abe f] [ مَعْلَى الْعَلَى الْعَلَى الْعَلَى الْعَلَى اللَّهُ عَلَى الْعَلَى مُعْتَلَيْقَلَى الْعَلَى الْعَلَى الْعَلَى الْعَلَى الْعَلَى عَلَى الْعَلَى عَلَى الْعَلَى الْعَلَ الْعَلَى ال الْعَلَى الْعَ مُعْلَى الْعَلَى الْعَل
  - (CEDæÁç^@akl/Á[¦Á&[{ àāj æaāj}}Á; Áç^@akl/•Á, ão@keb)Áæ&č æh/\*¦[••Á, ^ãt@oÁ[¦ÁæÁ\*¦[•• ^ât@oÁ¦æaāj\*ÁājÁ^¢&^••Á[~ÁGÎÊ<del>CE</del>Á][`}å•Á.@}Á[]^¦æaāj\*Áājd敜ae^L
  - ÇÓDæÁ-æał{ Áç^@a&l/^Á[¦Á&l[{àājaœaji}}Á[-Á-æał{ Áç^@a&l/^•Á, ãt@Áæjáæað; Áæ&čæah^\*][••Á, ^ãt@A/i]\*Áæjáæað; Ájá@aéjá@á/i) æá':{[••Á, ^ãt@A/æaji\*Ájdæ:cæc^L
  - ÇÔDæÁç^@384¦^Áå^●ãt}^åÁ[¦Áĭ ●^åÁq[Ád:æ}●][¦ơÁ([¦^Áo@æ);ÁFÍÁ]æ••^}\*^¦●ÉÁðj&|ĭåðj\*Áo@ å¦ãç^¦L
  - ÇÖDæk∮ç^@384|^Áslæ),●][¦cāj\*Á@zeælå[ĭ●Á(æc^\¦ãæþÁ^ĭĭālāj\*ÁseÁ)|æ&sælåL
  - ÇÒDæÁ[¦Á‡}Áš] { 3 إِكْمَا بَلَهُ { ]•¦^ إِكْمَا بَلَهُ اللَّهُ مُعَلَى اللَّهُ مُعَلَى اللَّهُ مُعَلَى اللَّ c@æxُa {هُمُ اللَّهُ إِنَّمُ الْأَمَةُ اللَّهُ اللَّهُ اللَّهُ اللَّهُ اللَّهُ اللَّهُ اللَّهُ اللَّهُ اللَّهُ الْأَسْتَعَالَى اللَّهُ اللَّعَامَ اللَّعَامَ اللَّعَامَ اللَّهُ اللَّ
  - ÇZDæÁ8[}dæáÁæk¦æk¦Ádæ)][+æj\*Ác@Á[]^¦ææj\*Á{]|[ ^^^+ Ác@Á]][ & bæá/[ æbá/[ æbá/[

ĢHDCEļļÁ^\* ĭ Jæsāl } • Á8[ } œsāl ^ å Áðj Á/āţ/ÁI JÉÉÔ[ å^Á[ ÁØ/å^ å^ !æţÁÜ^\* ĭ Jæsāl } • ÉÉÚætor ÁI €ÉÉHÌ €ÉÉHÌ GÊ HÌ Í ÁÉÁHÌ Ï ÉÁHJ€ÁÉÁHJHÁæ) å ÁHJÍ ÁÉÁHJÏ ÉÁæ) å ÁæţJÁðj &'] !^œsāl } • Áo@ !^d[ Á] ^!œsāl ð \* Á[ ĝ c^\:• œsc^Áŝi!ãç^\:• Ásēl å Áç^@38J^• Ást ^ Ást [ [ Ástal [ ] c^åÁ^¢8A^] ofser Á c@ !, ã ^ Ár¢8Jĭ å^å È Ç DOEÁ( ^ å å8æ‡Á^¢æξ ð æsāl } Á8^\:@a8æxêÉæ • ĭ ^ å Áðj Áæs88[ ! åæ) &^ Á, ão@ÁVãţ/ÁI JÉÉÔ[ å^Á[ ÁØ/å^ å^!æ U^\* ĭ Jæsāl } • ÉÉhhHUFÈFI ÉÉHUFÈ FÉÁHJFÈ HÉÆe) å ÁHJFÈ Í ÉÁ @æţJÁ^¢] ð ^ÁI JÉÉÔ[ å^Á[ ÁØ/å^!æ ù^\* ĭ Jæsāl } • ÉÉhhHUFÈFI ÉÉHUFÈ FÉÁHJFÈ HÉÆe) å ÁHJFÈ Í ÉÁ @æţJÁ^¢ æ ð æsāl } Ás0^!@a8ær^á à Âc@ Á[ ^ å å8æ‡Á^¢æξ ð ^!LÁ@], ^ c^\:ÉÅ] [ Á\* &@Á( ^ å å8æ‡Á^¢æξ ð æsāl } Ás0^!@a8ær^á à Âc@ Á[ ^ å å8æ‡Á^¢æξ ð ^!LÁ@], ^ c^\:ÉÅ] [ Á\* &@Á[ ^ å8æ‡Á^¢æξ ð æsāl } Ás0^!@a8ær^á @æţJÁ^ çæţãa Á{[ ¦Á( [ !^ Ás@æ)Á; [ Á^æ+ Ák][ { Ás@ Áŝær^Á] ~ Æ\* æð &^ E Ç DÞ[ c@ð \* Áð Ác@á Á\* & œ₫JÁA ÁSE] } eC \* ^ åÁξ Á] ![ @ãa ãAæð Á^{ ] [[ ^^!Á+[ { Á/^ ĭ ð ð å Aæj \* Áæ] å

(C) DÞ[ơ@ā, & Aā, Aco@á, & Aoa) & Aa (A) { Ab (A) } Aoa) & Aoa)

Source Note: The provisions of this §4.11 adopted to be effective March 9, 2004, 29 TexReg 2376; amended to be effective August 31, 2004, 29 TexReg 8375; amended to be effective January 4, 2005, 29 TexReg 12235; amended to be effective May 22, 2005, 30 TexReg 3031; amended to be effective September 22, 2005, 30 TexReg 6065; amended to be effective January 24, 2006, 31 TexReg 404; amended to be effective May 30, 2006, 31 TexReg 4442; amended to be effective October 1, 2006, 31 TexReg 8109; amended to be effective January 28, 2007, 32 TexReg 245; amended to be effective April 30, 2007, 32TexReg 2370; amended to be effective August 16, 2007, 32 TexReg 5034; amended to be effective January 2, 2008, 32 TexReg 10056; amended to be effective June 11, 2008, 33 TexReg 4527; amended to be effective December 10, 2008, 33 TexReg 10048; amended to be effective February 25, 2010, 35 TexReg 1470; amended to be effective November 8, 2010, 35 TexReg 9919; amended to be effective May 10, 2011, 36 TexReg 2995; amended to be effective June 26, 2012, 37 TexReg 4602; amended to be effective July 6, 2014, 39 TexReg 5190; amended to be effective March 29, 2015, 40 Texeg 1859; amended to be effective July 27, 2016, 41 TexReg 5432Å

TITLE 37ÁÚWÓŠÔÂUŒÒVŸÁŒ ÖÁÔUÜÜÒÔVOJÞÙÁPART 1ÁVÒÝŒÙÁÖÒÚŒÜVT ÒÞVÁJØÁÚWÓŠÔÂUŒÒVŸÁCHAPTER 4ÁÔUT T ÒÜÔQŒŠÁ XÒPÔÔŠÒÁÜÒÕWŠŒ/QJÞÙÁŒ ÖÁÒÞØUÜÔÒT ÒÞVÁ<br/>ÚÜUÔÒÖWÜÒÙÁSUBCHAPTER BÁÜÒÕWŠŒ/QJÞÙÁÕUXÒÜÞQEÕÁÜDEDÚÚUÜVŒ/QJÞÂUŒZÒVŸÁRULE §4.12Exemptions and Exceptions

- ĢaĐÒ¢^{] cā[}•ĚÒ¢^{{] cā[}•Á[Ác@/Áœå[] cā[}•Áð] Áh IÈ=FÁ[ ~Ác@árÁcād|^ÁÇ^|ææð] \*Á(FÁO] \*ÁdAOE] | &&æáðaða áac Áæða å Ö^-ðj ānā[}•DÁeeb^Á( æå^Á)`¦•`æ) cÁ(FÁ/^¢æ•Á/¦æ)•][¦cææð] }ÁÔ[å^ÊðhhÎIIEÉÍGÁEÂAIIEÉÍEÍÉæ) å Áæb ^Áæå[] c^å æ•Á{[]] , •K
  - َرْ EDU<sup>''</sup>&@Á^\*´|ææa]}•Á@æa¦Á[oÁa]]|Â(IÁo@Á)[|[], ]}\*Áçô@38,4•Á,@8}/A[]^|æe^åÁgidæe cæe^K CEDæ¢ç^@38,4^Á•^åÁgiÁ[iÁ(iÁ;iæe^¦Á, ^||Á•^¦ç383ji\*Á[iÁå¦ā]jiá]\*Á;@38,@ÁaiÁæiÁæiÁa;jedčaé kaé(:æ&@3)^

    - ÇÔDæÁç^@3&|^Átæ)•][[ˈlɑ͡j \* Á ^^åÁ&[ ɑ[ } LÁ[ :
    - ÇÖD&[}&¦^c^Aj`{]•È
  - - ĆÓDc@Aå¦āçāj\*Áāj^ÁðjÁœÁj^¦ājåÁðj{{ ^åãæe^\^Áà^-{ ¦^Áa} \* dee^`¦Á\*æ&@A\^•ó4j^¦ajåÁðjÁc@A\*|^^]^¦

à^¦c@ĐĂ, @e} Áscåå^åÁq[\*^c@e¦ÊÅa[^•Á,[cÁ^¢&^^åÁFGÁQ[`¦•LÁ

- ÇÔDc@A[}Áå`c Áā[^Aā]A(@A]^\ā]āÁā[{ ^åãæe^} A]A(@A]A[^\*A@A]A[^\*A@A]A[^\*A@A]A[\*\*A@A]A[\*\*A@A]A[\*\*A@A]A[\*\*A@A]A[\*\*A@A]A[\*\*A@A]A[\*\*A@A]A[\*\*A@A]A[\*\*A@A]A[\*\*A@A]A[\*\*A@A]A[\*\*A@A]A[\*\*A@A]A]A
- ÇÖDc@ Áŝláţ^\łĄ æ Ál [ Áĥ č l } Át Áŝlãţā \* Á šab & At Áœ Áj [ l ; æ Á 2 ; e Át → k ; cã A A , č ša A { ^ } e Ág c@ x Å \* č Å \*
- - ýÓDV@ Á^¢&^jễā [}^åÁşiÁ coặs Á ẩặ Á coặs Á] adat làng @ Ang @ Ang Á á Á á Á adat (ãng Á á Á á Á á A á á á á á å¦\*\*Áang å Á adag (@ lÁc∿•ci);\*Ál^``ã^{{ ^} o Á §[}caang ^åÁng Á /ãd/Át JÉÓ[å^Át Á á Á á Á á Á á Á Úador Át €Áang å Áni CÈ
- ÇDV@Á(ænā)&^Á, Ánzáká/áč, [Å, Ánzáká/áč, [Å, Ánzáká/áč, Å, Ånzáká/áč, Ånzáká/á
  - ÇCEDc@`Á\$ilāç^¦Á^č`¦}●Á{[Ác@`Á}[¦{`aqÁ}[¦\Ă^][¦cā]\*Á[8ææā]}ÁæjåÁãe Á^|^æ•^åÁ¦[{ Á, [¦\Á,ãc@3), ÁFG &[}●^&čcãç^Á@{`¦●L
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      - ÇanD c@ Át[cæ‡Á,`{ à^¦Á, Áq2`¦•Ás@ Ás¦ãç^¦ÁsiÁ,} Ás`c Á æ&@ásæ`L
      - QããD c@ Áxã, ^Áx@ Ás¦ãç^¦ÁārÁ^|^æe^åÁ\[{ Ási`c`Á^æ&@ásæ`L
- - َ (CED c@ Ášlāç^¦Ă^č ¦}•Át[Ác@ Áj[¦{ aqÁ, [¦\Á^][¦Gāj \* Á[ &aæaāt]}Áse) å Áše Á^|^æ ^ å Á'[{ Á, [¦\Á, ão@aj ÁFI &[}•^&` cāç^ÁQį` ¦•L
  - ÇÓD c@ Á ¼ ¦ãç^ ¦Á@ee Áscé/^æe ó Á&[} ^&` cãç^ Á@Į` ¦• Á [~Áů` č Á^] æ¦ææãj \* Á^æ&@ÆT Á@Į` ¦• Á} Åů` č L
  - ÇÔDo@\Áå¦ãç^¦Áå[^•Á][oÁ\¢&^^åÁFGÁ@[`¦•Á[æ¢ã]`{Áå¦ãçã]\*Áãā[^Á{[||[]]ā]\*ÁÌÁ&[}•^&`cãç^Á@[`¦• \_\_\_\_[~~ÁåjčcLÁæ)jå
  - - ÇD c@ Áxã ^ Áx@ Ásilãç^ \ Á^] [ \ c Á[ \ Ás` ć Á æ&@ ásê L
    - ÇãD c@ Á{[cæ|Á,`{ à^¦Á, Á@[`¦∙Ác@ Áå¦ãç^¦Áã Á;}Áå`c`Á æ&@ÁåæêL
    - Çãã Đo@ Áãį ^Áx@ Áå¦ãç^¦Áār Á^|^æe^åÁ¦[{ Áå`č Á\*æ&@áåæîL
    - Çãç Do@ Á( add Áa ^ Á[ ) Áa č Á[ ¦Áœ Á] ¦Áœ Áa \* Ái Áa óka i A á a @ Á/ā A JÉÓ [ å^Á] ~ Ø^ å^ ¦ add Ú^ \* ` |aæa] } • Éán HUÍ È Qãq CĐÁ [ ¦Ás ¦ãç ^ !• Á • ^ å Áf ¦Áœ Áa • óka i ^ Át ¦Ás c^ ! { ãc } d` LÁsa) å Ç D c@ Á[ [ d] ¦Ása ¦ã \ Á[ æa j cæa] • Áa ` • ā ^ • • Á ^ & [ ¦å • Á @ æa Í] ! [ çãa ^ Ác@ Áa æe Éta i ^ Ét ` æ) cã ĉ Éta j å [ &æaa ] Å[ ~Ác@ Áa ^ |ãç ^ ! ^ Á[ ~ÁæÁ] ! [ å \* &óA[ ¦Á • ^ ! çã& ÉA j &] \* Áa ^ |ãç ^ ! ^ Áca& ^ o Á[ ¦Á • æ ā c] ã& • È
- - - ýÓDW•ā]\*Áæ)Áæčd[{ææã8Á[})Ëa[æååÁ'^&[¦åā]\*Áå^çã&^Ác@ææÁ(^^œÁc@ææÁ(^^œÁc@ææÁ(^^`čā^{^}`ð^{^}o\*Á[~ÁVãd^ÁIJÊ Ô[å^Á[·ÁØ^å^¦æ4ÄÜ^\*\*]ææã[}•ÉánHJÍÈFÍLÁ[¦

- ÇÔDTæ) čæ|^ÊA\^&[¦å^åÁæe Á+]^&ãæà åÁājÁVãt|^ÁIJÊAÔ[å^Á[-ÁØ^å^¦æ‡ÁÜ^\*č|ææā[}●ÊAhHJÍÈEÁV@ |^&[¦åÁ[-Áåč ĉÁ+œæč ●Á(č●ÓÀà^Á\^&[¦å^åÁājÁåč]|ã&æe^Á-[¦Á^æ&@ÁGIË@[č|Å]^¦ā[åÁ-[¦Á]@&&@ |^&[¦åā]\*ÁsiÁ^ččān^åÈ
- ɔ•´ )À ٩ ه ه المحفي ( ) ك المحفي ( ) ك المحفق ( ) } ] كُلُم ه ( ) ك المحفق ( ) ك المحفق ( ) ك مك مق المحاف ( ) ك مك مق ق محف ( ) ك محف ها محفق ( ) ك محفق ق محفق ( ) ك محفق ( محفق ( ) ك محف محفق ( ) ك محفق محفق ( ) م
- ÇJDV@^Á] [[çãaţ]}•Á[ÁVãu|^ÁIJÊÂÔ[å^Á[ÁØ/å^¦æ4ÁÜ/å'|ææ4i}•ÊÁÚæ4óÁHJÍÁ•@æ4|Á][óÁæ3]] [^Áq[Áå¦ãç^\• dæ)=][¦cā)\*Áæ5'¦ã&`|c覿4Á&[{ [åãaã•Á4}Á4jÁ4]dæ•cæe∿Á&[{ { ^\&^A[{Áæ5'}iã&`]覿4Åjč'][•^•A,áão@a)Áæ4Åfí€ æ5dÊ; ā/Áæ5ã•Á4[{ Ác@^Á4[{ { c@^Á4[ ~ Ác@^Á84[ { [åãaã•Á4] ¦Ác@^Áåā:dāa`cāu}A]]Á][ā)cÁ[¦Ác@Aæ4{ Á\*`]]][ā• åč¦ā]\*Á,[æ3;cāu\*Áa⊕àÁ@e4cç^•cāu\*Á^æ6]}•È
- Áçā DÔ¢&^]cā[}•ĖĂÒ¢&^]cā[}•Áæå[]c^åÁà^^Ác@^Áåãa^&q[¦Á[, Ác@ ÁV^¢æAÖ^]æ-{(^}o^{(^^)}álã&ÁÙæ^ćÂ)[] •]^&ããðaÅá§ Á/^¢æ Á/¦æ)][¦cæaā[}ÁÔ[å^Êhî]||ÈE[HÊbbc^ÁæÁ4[][, •K
  - ÁĞFDÁVád/ÁÍJÉÁŐ[å^Á[´ÁØ^å^¦àaÁÜÖ^\*`|æaā]) ÉÁhHJHÈÌÎÉÁ¦^<sup>\*\*</sup> alā \* Á¦^æd?) àÁ] [C%aa‡}} Å• @ed|A}[œá] (A`à^ æ]]|&Bæài|^Á,![Çãa^åÅá@@Áç^@B&|^Á;æA; æ; Á;æ3; ~æ&c`¦^åÁ,!ā[!Át[ÁÛ^] c^{{`à^!AFÉAFJJFÁæ}åAárÁ • ^åÁr[|^|^Ás] ā]dærœæ^Á§[{ { ^}&^È

  - Q=D Q[¦Áå¦ãç^\!•Á[-Á&[{ { ^!&ãæ¢A{ [ d[ !Áç^@38|^•Á[]^\!æaā] \*Áā] Áā] dæ; œæcxÁdæ) •] [ !œæā] }Áæ) åA' \*^å ^¢&\]`•ãç^|^Áāj Á@ Ádæ) •] [ !œæā] }Á[ ~Á[ā]+ā\|åA``ā] { ^} dÉāj &\]`āā] \*Áœ Ádā] \*ā] \*Áæ) åA[ā&\]ā \*Á] Å[ AA] ā ^ o^åAā] Á] ā] ^]ā ^•Éžea) åA\* ^!çã&ā] \*Á[ ~Ác@ Á&) åA[] ^!æaā] }•Á[ ~Ác@ Á} æč !æ‡Á\* æ Áæ) åA[āA] ā] \*á] \*Á] ] ^!āt åA[ ~Äi Á&[ } •^&č aç^Áåæê Á[ æÁ^} åA] ã@éc@ Áà^\*ā] }ā] \*Á[ ~Áæ) ^Á[ ~Æā` c´Á] ^!āt åA[ ~ÁCI Á[ !Á[ • ` &&^• aç^ÁQ` '] •È
  - Ç DQ[ kå: lãr^i•Á; Áærák[ { ^!&ãæráfí [ d[ kár/@38(Å í] ^!ææð; \*Áð; Áð; dæ: cæær Ád:æð; •] [ !cææð; } Åæð; åá + ^åá/; lã; æða í ā; Ác@ Ád:æð•] [ !cææð; }Á[ -Á8[ }•d`&cð; }Á( æer/lãæd+Áæð; åá /\* č a] { ^} dÊ/æð; ^Á] ^!ā; åá /; -Äï Á8[ }•^&č aŭr/Áåæð: { æô Ár} å ár@áko@ Ási^\*āj }ā; \*Á; -Áæð; ^Á; -Æå` c` Á; ^!ā; åÁ; -ÁGI Á; !Á; [ !^A \* & & \*• aŭr/Á@` !•EÁÁ/!æð; ] [ 'cææð; } [ -Á8[ }•d`&cð; }Á( æer/lãæd+Áæð; åá /\* č a] { ^} dÁ@æe Ác@ Á; ^æð; ā] \* Áæ• eð; ^ åáà; Á/ãd/Á; JÉÓ[ å^Á; -ÁØ/å^!æð; Ü/\*\* [ææð; ]•EÁhHUÍ ÈDÈ

  - Ç̈DVãı[A JÊAO] å^A [ĂØ] àÅa^kætAU^\* |æaā] ÊAh HIJ FĚFÇa DQEDÊĂã Á [ Aða ] dæ cæe^Aå iāç^i ĔAOB ā dæ cæe^Aå iāç^i Á ` • oÁ@æeç^Á ` &&^• • ~ || ʿA] æ • ^ åÁc@ Á ¢æa{ā æā] } Á[ ¦ÁæA/v¢æ AÔ] { { ^ k&ætAö |ãç^i © Šã&} • ^ Áæj åÅa^ÁæA{ ā ā ` { Áœt^A} A Arì Á ^ æt• A [ Å æt• A] ÅE

  - ÇIDVãt|^Á, JĒŹĴ (å^Á; Á⁄Z^å^¦æÁ; læā; ) ●ÊħHJ€ÈĖHÁÇÜ^|ã^Á; (ÁŰ^\*` )æā; ) ●DĚá; Áœå[] & åÁ; læā; ) ●DĚá; Áœå[] & åÁ; læa; a eæe^ { [dː¦Á&æk; lãː¦●, jã@Á@Á[ ||[, j] \* Á¢&^] cā; ) ● K
    - - ÇDå[&č{^}orÁc@Ácî]^Á[, Á^{^\\*^}& ÉÉco@Áå覿æā]}Á[, Ác@Á^{{^}+^}& ÉÉco@Áå覿æā]}Å (^\\*^} & ÉÉce)åÅco@Áå¦ãç^\+Áčdajã^åL æ}å
      - ÇãD{ aêj cæj Ác@ Áů[&`{ ^} cæej } Á; } Áậ^ Á[ ¦ÁæÁ{ ∄, ã{ ` { Âţ ~ Á 㢠Á[ ]} c@ ÈÁCB; Á\*{ ^ !\* ^} & Â` Å å^ !Á œê ] a b at ! ab @ Áŭ [ } ^ Ác@æÁã Á| ^ cÁ` } aec ^} å^ å Å [ ` |å Á'.•` | cÁb; Áā { ^ å ãæe^ Á• ^ ! ã[ ` e Áb; [ å ấ` Á@æb { Ê å^ aec@{t ! Á\*` à• cæb; cãæ¢ Á; ![] ^ ! ĉ Áb; aet at ^ Áb` cÁb; [ ^ • Á; [ cÁb; &]` å^ Á[ ` câj ^ Á.^`` ^• o• Át[ Á^ Ëãµ Á\*{ ] ĉ ] ![] ab ^ Át æe Ácæb; \• È

ÇÓDV@Á^čă^{A}@A JÊÔ[å^Á, ÁZā]^Á JÊÔ[å^Á, ÁZ^å] { [d] ¦Á&æd; āð \●Á @ædjÁa^K QD c@Áa¦āç^¦Á@æd, Á ^cá@@Á^ččã^{ ^} @A Á^⁄¢æe Á/¦æd) •] [¦œæaj} ÅÔ[å^ÊÔ@æd] cº¦Â | | LÁæd) å

ĢFGDV@:ÁW}ãc^åÁÙœæc^•ÁÖ^]ædq(^}c^{[-ÁV|æ]•][¦œæāţ]}Áj`{ à^¦Á^``ā^{ ^} @ Áðj ÁV^¢æe ÁV|æ]•][¦œæāţ] Ô[å^ÊÂÔ@æ];c^¦ÁÎ I HÁå[Á][cÁæj]]^Ád[Áç^@&&A^•Ð][d[¦Á&æd;lã\'•Á[]^¦ææāj\*Á^¢&\]`•ãç^|^Áāj dæe œæc^ &[{ { ^\&^Áæ}jåÁc@æeÁæd^Á^¢^{ ] c^åÁ-{[{ Ác@•Á¦^``ā^{ ^} @ Áà^ÁV^¢æe ÁV¦æ]•][¦œæāţ]}ÁÔ[å^Ê hÎ I HÈE€GÈ

Source Note: The provisions of this §4.12 adopted to be effective March 9, 2004, 29 TexReg 2376; amended to be effective August 31, 2004, 29 TexReg 8375; amended to be effective January 4, 2005, 29 TexReg 12235; amended to be effective January 24, 2006, 31 TexReg 404; amended to be effective May 30, 2006, 31 TexReg 4442; amended to be effective October 1, 2006, 31 TexReg 8109; amended to be effective January 28, 2007, 32 TexReg 245; amended to be effective August 16, 2007, 32 TexReg 5034; amended to be effective February 25, 2010, 35 TexReg 1470; amended to be effective December 16, 2013, 38TexReg9063; amended to be effective September 28, 2016, 41 TexReg 7511; amended to be effective March 20, 2017, 42 TexReg 1256

| Major (512) 424-2775   | MOTOR   | <b>CARRIER BUREAU</b>   |
|--|---|---|
|  | Cisco IP Phone H  | leadquarters prefix - "8"   |
| Motor Carrier Bureau   |   |   |
| Captain  | (512) 424-2053  | CVE Training U  |
| Admin Assistant  | (512) 424-5926  | Lieutenant (CVE Tra   |
|  |   | 5807 Guadalupe St B   |
| MCB Attorney   | (512) 424-2884  | PO Box 4087 (78773  |
| MCCA Admin Assistant   | (512) 424-2335  | Training Sergeants:   |
|  |   | Sergeant  |
| MCB Tech Support   | (512) 424-2051  | Sergeant  |
|  |   | Sergeant  |
|  |   | Sergeant  |
| MCB Lobby/Receptionist   | (512) 424-2051  | Training Specialist   |
|  | or (512) 424-2052   | Training Specialis  |
|  |   | Training Specialis  |
| Motor Carrier Compliance Audit   |   | Training Specialis  |
|  |   |   |
| MCCA Program Manager(MCCA/CRP 6M1,4)   |   |   |
| MCCA/CRP Admin Assistant   | . ,   | Training Unit Su  |
|  | FAX (512) 424-5712  | Program Supervisor  |
| MCCA Section Supervisor  | (512) 424-2747  | Admin Assistant   |
|  |   | 6200 Guadalupe, Blo<br>Email: CVE.Training@   |
|  |   | Email: CVE.Training@  |
| Motor Carrier Safety   |   | School Bus Safe   |
| Lieutenant (MCS/Scale/CR 6M3,6)  | (512) 424-2851  | School Bus Safety   |
| Scale Technician   | (512) 424-5087  | 5807 Guadalupe St B   |
| DataQs/CAPPS/Inventory   | (512) 424-2850  |   |
|  | (012) 121 2000  | Compliance Rev  |
|  |   |   |
| Motor Carrier Safety Section Supervisor  | (512) 424-2854  | 6M1 Field Manager - G   |
| MCS Admin Assistant  | (512) 424-2050  | 6M1 Field Manager - 0<br>350 W IH-30 - 7504   |
| MCS Admin Assistant<br>(MCB Open Records Request)  | (512) 424-2050<br>Fax (512) 424-5262                      | 350 W IH-30 - 7504<br>6M2 Field Manager - H   |
| MCS Admin Assistant  | (512) 424-2050<br>Fax (512) 424-5262                      | 350 W IH-30 - 7504<br>6M2 Field Manager - H<br>1313 University Ave  |
| MCS Admin Assistant<br>(MCB Open Records Request)  | (512) 424-2050<br>Fax (512) 424-5262                      | 350 W IH-30 - 7504<br>6M2 Field Manager - H<br>1313 University Ave<br>6M3 Field Manager - S   |
| MCS Admin Assistant<br>(MCB Open Records Request)<br>6200 Guadalupe, Bldg 'P" (PO Box 4087 78773-0 | (512) 424-2050<br>Fax (512) 424-5262<br>520) Austin 78752 | 350 W IH-30 - 7504<br>6M2 Field Manager - H<br>1313 University Ave<br>6M3 Field Manager - S<br>2632 Broadway Ste  |
| MCS Admin Assistant<br>(MCB Open Records Request)  | (512) 424-2050<br>Fax (512) 424-5262<br>520) Austin 78752 | 350 W IH-30 - 7504<br>6M2 Field Manager - H<br>1313 University Ave<br>6M3 Field Manager - S   |
| MCS Admin Assistant<br>(MCB Open Records Request)<br>6200 Guadalupe, Bldg 'P" (PO Box 4087 78773-0 | (512) 424-2050<br>Fax (512) 424-5262<br>520) Austin 78752 | 350 W IH-30 - 7504<br>6M2 Field Manager - H<br>1313 University Ave<br>6M3 Field Manager - S<br>2632 Broadway Ste<br>6M4 Field Manager - Lu  |
| MCS Admin Assistant  | (512) 424-2050<br>Fax (512) 424-5262<br>520) Austin 78752 | 350 W IH-30 - 7504<br>6M2 Field Manager - H<br>1313 University Ave<br>6M3 Field Manager - S<br>2632 Broadway Ste<br>6M4 Field Manager - Lu<br>1404 Lubbock Business P   |
| MCS Admin Assistant  | (512) 424-2050<br>Fax (512) 424-5262<br>520) Austin 78752 | <ul> <li>350 W IH-30 - 7504</li> <li>6M2 Field Manager - H<br/>1313 University Ave</li> <li>6M3 Field Manager - S<br/>2632 Broadway Ste</li> <li>6M4 Field Manager - Lu<br/>1404 Lubbock Business P</li> <li>6M5 Field Manager - H</li> </ul> |

## **IER BUREAU**

| qua                   | rters prefix - 8  |   |  |  |
|-----------------------|---|---|--|--|
| С                     | VE Training Unit  |   |  |  |
|                       | eutenant (CVE Training/CRP 6M2,5)   | (512) 424-2880  |  |  |
|                       | 5807 Guadalupe St Bldg "N"  |   |  |  |
|                       | PO Box 4087 (78773-0520) Austin 787852  |   |  |  |
| Ţ                     | raining Sergeants:  |   |  |  |
|                       | Sergeant  | (512) 486-6481  |  |  |
|                       | Sergeant  | (512) 424-2695  |  |  |
|                       | Sergeant  | (512) 486-6482  |  |  |
|                       | Sergeant  | (512) 486-6483  |  |  |
| <b>-</b>              |   |   |  |  |
| <u></u>               | raining Specialist  | (E12) 496 6490  |  |  |
|                       | Training Specialist   | (512) 486-6480  |  |  |
|                       | Training Specialist   | (512) 424-7485  |  |  |
|                       | Training Specialist   | (512) 437-4740  |  |  |
|                       |   |   |  |  |
| Т                     | raining Unit Support Staff:   |   |  |  |
|                       | gram Supervisor   | (512) 424-5381  |  |  |
|                       | Admin Assistant   | ( )   |  |  |
|                       | 6200 Guadalupe, Bldg "P", (PO Box 4087 78773-0520) A  |   |  |  |
| Fm                    | ail: CVE.Training@dps.texas.gov   | usun 70752  |  |  |
|                       |   |   |  |  |
| School Bus Safety:    |   |   |  |  |
|                       | Orthand Bus Cofety Consultantes   | (512) 424 7200  |  |  |
|                       | School Bus Safety Coordinator   | .(512) 424-7396   |  |  |
|                       | 5807 Guadalupe St Bldg "N" Austin 78752   |   |  |  |
|                       |   |   |  |  |
| <u>C</u>              | ompliance Review Program Field Super  | <u>visors</u>   |  |  |
| 41                    | Field Manager - Garland   | . (214) 861-2463  |  |  |
|                       | 350 W IH-30 - 75043 Fax   | (214) 861-2409  |  |  |
| 42                    | Field Manager - Huntsville  | . (512) 424-2626  |  |  |
|                       | 1313 University Ave - 77340   | (no fax)  |  |  |
| 43                    | Field Manager - San Antonio   | (210) 531-2287  |  |  |
|                       |   |   |  |  |
|                       | 2632 Broadway Ste 402 North Bldg - 78215  | (no fax)  |  |  |
|                       | Field Manager - Lubbock   | 806) 740-8788 Fax   |  |  |
|                       | Field Manager - Lubbock   | 806) 740-8788 Fax<br>(806) 740-8791                                     |  |  |
| 140                   | Field Manager - Lubbock   | 806) 740-8788 Fax<br>(806) 740-8791<br>(281) 517-1280                   |  |  |
| 140                   | Field Manager - Lubbock   | 806) 740-8788 Fax<br>(806) 740-8791                                     |  |  |
| M4<br>140<br>M5<br>M6 | Field Manager - Lubbock.       (8         4 Lubbock Business Park Blvd Ste 100-79403       (8         Field Manager - Houston.       (8         12230 West Road -77065-4523       Fax         Field Manager - Weslaco.       (8 | 806) 740-8788 Fax<br>(806) 740-8791<br>(281) 517-1280<br>(281) 517-1257 |  |  |
| 140<br><b>45</b>      | Field Manager - Lubbock   | 806) 740-8788 Fax<br>(806) 740-8791<br>(281) 517-1280<br>(281) 517-1257 |  |  |

| Major (214) 861-2226                     | North Texas Regio  | n (Reg 1) - DALLAS (                           | Cisco IP prefix - "1")   |
|--|--------------------|--|--------------------------|
| 1A THP Captain                           | (214) 861-2155     | 1B THP Captain                                 | (903) 939-6031           |
| Lieutenant (Garland-HP A01,04;CVE 12,13) |                    | Lieutenant (Tyler-HP B02,13;CVE 15,16)         | (903) 939-6035           |
| Admin Assistant                          | (214) 861-2229     | Admin Assistant                                | (903) 939-6123           |
| (1A12) Sergeant {1A01/1E01}              | (214) 861-2222     | (1B15) Sergeant <i>{1A02/1E02</i> }            | (903) 939-6006           |
| 350 W. IH-30, Garland 75043              | Fax (214) 861-2233 | 4700 University Blvd, Tyler 75706 Si           | nelly Fax (903) 939-6045 |
| (1A13) Sergeant <i>{1A07/1E07}</i>       | (972) 923-6772     |  | Fax (903) 939-6005       |
| 1720 E Main St                           | or (972) 923-6770  | (1B16) Sergeant {1A06/1E06}                    | (903) 661-5023           |
| Waxahachie 75165                         | Fax (972) 923-6690 | 1900 W. Spring St., Palestine 75803            | Fax (903) 661-5040       |
| 1C THP Captain                           | (817) 299-1311     | 1D THP Captain                                 | (903) 575-2192           |
| Lieutenant (HP 1C06,11;CVE 12,13)        |                    | Lieutenant (HP D01,03,04,08¢VE D13,14)         | (903) 575-5363           |
| Admin Assistant                          | (817) 299-1314     | Admin Assistant                                | (903) 575-2191           |
| (1C12) Sergeant {1A03/1E03}              | (817) 299-1381     | (1D13) Sergeant (1A04/1E04/1B17}               | (903) 575-5358           |
| 624 NE Loop 820                          | (817) 299-1382     | 1906 N. Jefferson, Mt Pleasant 75455           | Fax (903) 575-5392       |
| Hurst 76053                              | Fax (817) 299-1323 |  |                          |
| (1C13) Sergeant {1A08/1E08}              | (940) 627-0035     | (1D14) <b>Sergeant</b> <i>{1A05/1E05/1B18}</i> | (903) 796-4782           |
| 2000 S Trinity, Decatur 76234            | Fax (940) 627-1513 | P. O. Box 1084, Queen City 75572               | Fax (903) 796-4794       |

| Major (281) 517-1202 Southeast Tex                                | as Region (Reg 2) - HOUSTON (Cisco IP prefix - "2")                       |
|---|---|
| <b>2A THP Captain</b>   | <b>2B THP Captain</b>   |
| Admin Assistant   | Admin Assistant (409) 924-5466  |
| 2A3 Lieutenant (CVE A8,A9; HP A01,A10) (281) 517-1261             | <b>2B3 Lieutenant (</b> HPB02,07,09,1 <b>3; CVE</b> 13,14) (936) 699-7367 |
| Admin Assistant   | Admin Assistant (936) 699-7301  |
| Fax (281) 517-1281  | 2809 S. John Redditt, Lufkin 75904 Fax (409) 924-5449                     |
| (2A08) Sergeant {2A01}  |   |
| 12230 West Road Fax (281) 517-1228                                | (2B13) Sergeant {2A05}  |
| Houston 77065   | Admin Assistant   |
|   | 7200 Eastex Frwy Beaumont 77708 Fax (409) 924-5449                        |
| (2A09) Sergeant {2A04} (281) 424-0315                             | (2B14) Sergeant {2A06}  |
| 5420 Decker Drive Fax (281) 424-6658                              | Admin Assistant (936) 699-7303  |
| Baytown 77520   | 2809 S. John Redditt, Lufkin 75904 Fax (936) 699-7383                     |
| <b>2C THP Captain (Conroe)</b>                                    | <b>2D THP Captain</b>   |
| Admin Assistant   | <b>2D1 Lieutenant</b> (HP D01,02; <b>CVE</b> 10,11)                       |
| <b>2CC Lieutenant</b> (HP C08,11; <b>CVE</b> 13,14)(936) 442-2800 | Admin Assistant   |
| Admin Assistant   | 5505 Ave N  |
| # 2 Hilbig, Conroe 77301  | Rosenberg 77471   |
| (2C13) Sergeant {2403}  | (2D10) Sergeant {2A02}  |
| Admin Assistant   | Admin Assistant   |
| 928 E. Commerce   | 5505 Ave N Fax (281) 633-5459   |
| Buffalo TX 75831  | Rosenberg 77471   |
| (2C14) Sergeant {2A07}  | (2D11) Sergeant   |
| Admin Assistant   | Admin Assistant   |
| 3179 IH-45 South Fax (936) 344-8583                               | 501 South Velasco Fax (979) 849-5707                                      |
| New Waverly 77358 <b>NB Scale</b> (936) 344-8553                  | Angleton 77515  |

## South Texas Region (Reg 3) - WESLACO

| 3                                     | outh Texas Regio   | n (Reg 3) - WESLACO                           |                      |
|---------------------------------------|--------------------|---|----------------------|
| Major (Weslaco) (956) 565-7510        |                    | 3A - Weslaco                                  |                      |
| 3A THP Captain (THP 3A)               | (956) 565-7520     |   |                      |
| Admin Assistant                       | (956) 565-7525     | (3A10) Sergeant <i>(3A05)</i>                 | (956) 399-5473       |
| Lieutenant (HP A07,08;CVE 9,10,11,12) | (956) 565-7591     | (Brownsville POE-Los Indios)                  |                      |
| Admin Assistant                       | (956) 565-7524     | Admin Assistant                               | (956) 399-5473       |
| 2525 N International Blvd             | Fax (956) 565-7527 | POB 367/609 S FM 509                          | Fax (956) 399-2431   |
| Weslaco 78599                         |                    | Los Indios 78567                              |                      |
|                                       |                    | (3A11) Sergeant <i>(3A04)</i>                 |                      |
| (3A09) Sergeant <i>(3A03)</i>         | (956) 440-6703     | (3A12) Sergeant <i>(3A07)</i>                 | (956) 541-4619       |
| Admin Assistant                       | (956) 440-6780     | (Brownsville POE-Los Tomates)                 |                      |
| ·                                     | Fax (956) 440-6792 | Admin Assistant                               | ( )                  |
| Harlingen 78550                       |                    | 2301 Courage St                               | Fax (956) 541-5635   |
|                                       |                    | Brownsville 78521                             |                      |
| Major (956) 565-7508                  |                    | 3B - Laredo                                   |                      |
| 3B THP Captain                        | (956) 728-2278     |   |                      |
| Lieutenant (CVE 3B12,13,14,15,16,17)  | (956) 728-2261     |   |                      |
| Admin Assistant                       | (956) 728-2314     |   |                      |
| 1901 Bob Bullock Loop (mailing)       | Fax (956) 728-2340 | (3B15) <b>Sergeant</b> <i>(3B03</i> <b>)</b>  | (956) 728-2200       |
| Laredo 78043-9701                     |                    | Admin Assistant                               | . (956) 728-2385     |
|                                       |                    | 715 Bob Bullock Loop(physical location-78045  | )                    |
| (3B12) Sergeant (3B01)                | (956) 728-2210     | 1901 Bob Bullock Loop (mailing)               |                      |
| Admin Assistant                       | (956) 728-2210     | Laredo 78043-9701                             |                      |
| (3B13) Sergeant <i>(3B02)</i>         | (956) 728-2200     |   |                      |
| Admin Assistant                       | (956) 728-2296     | (3B16) Sergeant <i>(3B04)</i>                 | (956) 728-2200       |
| 1901 Bob Bullock Loop (mailing)       | Fax (956) 728-2250 | 715 Bob Bullock Loop(physical location-78045  | )                    |
| Laredo 78043-9701 CR                  | Fax (956) 728-2277 | 1901 Bob Bullock Loop (mailing)               | Fax (956) 417-5644   |
|                                       |                    | Laredo 78043-9701                             |                      |
| (3B14) Sergeant <i>(3B06)</i>         | (956) 728-2384     |   |                      |
| Admin Assistant                       | (956) 728-3642     |   |                      |
| 515 N FM 3167 (C                      | Columbia POE)      |   |                      |
| Rio Grande City 78582                 | Fax (956) 417-5644 |   |                      |
| (956) 716-3600                        |                    |   |                      |
| Major (Weslaco) (956) 565-7510        |                    | 3C - Corpus Christi                           |                      |
| 3C THP Captain                        | (361) 698-5613     |   |                      |
| Lieutenant (3C10,C11,3C12; HPC13)     | (361) 698-5631     | (3C11) Sergeant (3C02,3C03)                   | (361) 296-3391       |
| Admin Assistant                       | (361) 698-5672     | Admin Assistant                               | (361) 296-3391       |
| (3C10) Sergeant (3C01)                | (361) 698-5632     | 6336 S Hwy 77                                 | Fax (361) 296-3799   |
| Admin Assistant                       | ()                 | Riviera 78379 (aka Kingsville)                |                      |
| 1922 S. Padre Island Dr.              | Fax (361) 698-5504 |   |                      |
| Corpus Christi 78416-1399             |                    | 3C11-CMV Program Supervisor (Riviera & Falfur | rias) (361) 325-2619 |
| (3C12) Sergeant (3C07)                | (361) 668-8296     | Admin Assistant                               | (361) 325-2619       |
| Admin Assistant                       | (361) 668-8296     | PO Box 463 Falfurrias 78356                   | Fax (361) 325-4636   |
| 300 S Johnson Alice 78332             | Fax (361) 668-4535 | FAL Scale: SB (361) 325-2746 NB (361          |                      |

| Major (Weslaco) (956) 565-7510                              | 3D - McAllen   |
|---|--|
| <b>3D THP Captain</b>                                       |  |
| Admin Assistant   | (3D13) Sergeant (3A02) (956) 782-9261                  |
| Lieutenant (D12,D13,D14,D15) (956) 565-7572                 | Admin Assistant (956) 782-9261                         |
| Admin Assistant (956) 565-7571                              | 111 Palmshores Dr, La Joya 78560                       |
| 1414 N Bicentenial Blvd, McAllen 78501 Fax (956) 984-5730   | Pharr POE-Reynosa                                      |
|   | (3D14) Sergeant (3A06) (956) 782-9261                  |
|   | Admin Assistant  |
| (3D12) <b>Sergeant</b> <i>(3A01)</i>                        | (3D15) Sergeant (3A08)                                 |
| Admin Assistant (956) 565-7581                              | Admin Assistant  |
| 2525 N International Blvd, Weslaco 78599 Fax (956) 565-7599 | 301 Capote Central Ave, Pharr 78577 Fax (956) 782-4913 |
|   |  |
| Major (956) 565-7508  | 3E - Del Rio   |
| <b>3E THP Captain</b>                                       |  |
| Admin Assistant   | (3E10) Sergeant {3C05}                                 |
| 2012 Veterans Blvd. Del Rio - 78840 Fax (830) 703-1298      | Admin Assistant  |
| Lieutenant (3E9,E10,E11) (830) 752-6912                     | 555 S. Monroe, Eagle Pass 78852 Fax (830) 757-5355     |
| Admin Assistant{Del Rio}                                    | (Camino Real BSIF)                                     |
| Lisa' Fax (830) 703-1298                                    | (3E11) Sergeant (3C06)                                 |
| (3E09) Sergeant {3C04}                                      | Admin Assistant  |
| Admin Assistant   | 2012 Veterans Blvd Fax (830) 775-9030                  |
| 32 Foster Maldonado. Eagle Pass 78852 Fax (830) 752-6962    | Del Rio 78840 (Del Rio POE)                            |

| Major (915) 849-4182                                   | West Texas Region  | (Reg 4) - EL PASO                       | (Cisco IP prefix - "4")       |
|--|--------------------|---|-------------------------------|
| 4A THP Captain   | (432) 498-2141     | 4B THP Captain                          | (915) 849-4002                |
| CVE 4A05,A09,A16.                                      |                    | CVE 4B09,B10,B11,B12,B13                | ,B14,B15,B16.                 |
| Admin Assistant  | (432) 498-2140     | Admin Assistant                         | (915) 790-5311                |
| 2405 S. Loop 250 W. Midland 79703                      | Fax (432) 498-2147 | 11612 Scott Simpson El Paso 779         | 36 Fax (915) 790-5380         |
| <b>4A4-D Lieutenant</b> (HP4A2; <b>CVE</b> 4A05,09,16) | (432) 498-2181     | <b>4B3-C Lieutenanť</b> B09,10,11,12,13 | ,14) (915) 838-7715           |
| Admin Assistant  | (432) 498-2180     | 650 Gateway North, El Paso              | 79905                         |
| 2405 S. Loop 250 W.                                    | (432) 498-2182     | Admin Assistant                         |                               |
| Midland 79703  | Fax (432) 498-2495 | (4809) Sergeant (BOTA POE)(4A05         | <i></i>                       |
|  |                    | (4B10) Sergeant (BOTA POE)(4A06)        | )(915) 838-7715               |
| (4A05) <b>Sergeant</b> <i>(4A04/4A19)</i>              | (432) 363-7400     | (4B11) Sergeant ( <i>4A07</i> )         |                               |
| 1910 IH 20 West, Odessa 79762                          | Fax (432) 363-7465 | 650 Gateway North, El Paso              | 79927 Fax (915) 838-7716      |
| (4A09) Sergeant (4A02/4A17)                            | (325) 223-6881     | (4B12) Sergeant (Ysleta POE) (4Ad       | <i>08)</i> (915) 790-5300     |
| Admin Assistant  | (325) 223-6880     | (4B13) Sergeant (Ysleta POE) (4A        | <i>09)</i> (915) 790-5300     |
| 1600 W Loop 306, San Angelo 76904                      | Fax (325) 223-6931 | 9670 Rio Del Norte, El Paso 7           | 9927 Fax (915) 790-5380       |
| (4A16) Sergeant (4A01)                                 | (432) 498-2182     | (4B14) Sergeant (4A03/4A18)             |                               |
| Admin Assistant  |                    | 2302 W. Dickinson, Fort Stoc            | kton 79735 Fax (432) 336-6811 |
| 2405 S. Loop 250 W., Midland 79703                     | Fax (432) 498-2495 |   |                               |

| Major (806) 740-8987 Northwest Texa     | As Region (Reg 5) - LUBBOCK (Cisco IP prefix - "5")  |
|---|--|
| <b>5A THP Captain</b>                   | <b>5B THP Captain</b>  |
| Lieutenant (5A09,A10)                   | Lieutenant (HP 5B04,05,06;CVE 5B09) (940) 937-2548   |
| Admin Assistant (806) 740-8992          | 1700 Avenue F NW, Ste A, Childress 79201 Fax (903) 937-6679  |
| 1404 Lubbock Business Park Blvd Ste 100 | (5B09) Sergeant(5A04/5B12)(940) 937-2548   |
| Lubbock TX 79402                        | Admin Assistant  |
|   | 1700 Ave. F, NW, Childress 79201 Fax (940) 937-6679  |
| (5A09) <b>Sergeant</b> <i>(5A01)</i>    | Lieutenant (HP 5B01,03,10;CVE 5B11)  |
| (5A10) Sergeant(5A02)                   | 5C THP Captain       (325) 795-4020         Lieutenant (West: HP 5C05,06,07; CVE 09)       (325) 795-4066         2720 Industrial Blvd. Abilene 79605       (325) 795-4060         Admin Assistant       (325) 795-4060         333 Pine, Colorado City 79512       (325) 795-4060         (5C09) Sergeant (5A05/5A11)       (325) 795-4060         Admin Assistant       (325) 795-4060         32720 Industrial Blvd. Abilene 79605       Fax (325) 795-4114 |

| Major (210) 531-2269                 | Central Texas R        | egion (Reg 6) - SAN ANTONIO          | (Cisco IP prefix - "6") |
|--------------------------------------|------------------------|--------------------------------------|-------------------------|
| 6A THP Captain {Waco}                | (254) 759-7160         | 6C THP Captain {San Antonio}         | (210) 531-2206          |
| 1617 E. Crest Drive, Waco TX 76705   | Fax (254) 759-7171     | 6C-4 Lieutenant (HP 05;CVE 15,16,17) | (210) 531-4318          |
| 6A-3 Lieutenant (HP 04,07; CVE 11)   | ····· (254) 759-7168   | Admin Assistant                      | (210) 531-2245          |
| Admin Assistant                      | . (254) 759-7143       | (6C15) Sergeant(6A01)                | (210) 531-2247          |
| (6A11) Sergeant(6A06)                | (254) 759-7169         | 6502 S. New Braunfels Ave.           | Fax (210) 531-2226      |
| 1617 E. Crest Drive, Waco TX 76706   | Fax (254) 759-7170     | San Antonio TX 78223                 |                         |
| 6B THP Captain {Austin}              | (512) 997-4101         | (6C16) Sergeant (6A02)               | (830) 665-8035          |
| 6B-1 Lieutenant (HP 01,4,5,11)       | (512) 997-4104         | Admin Assistant                      | (830) 665-8035          |
| 6B-2 Lieutenant (HP 02,3,7,8)        | (512) 997-4103         | 203 S. Teel, Devine TX 78016         | Fax (830) 665-8007      |
| 6B-3 Lieutenant (HP 06,9; CVE 10,12) | <b></b> (512) 997-4015 | SB Scale(830) 665-8049 NB S          | Scale (830) 663-9948    |
| 9000 N. IH-35.Austin TX 78753        |                        |                                      |                         |
| (6B09) Sergeant <i>(6A04)</i>        | (512) 353-4245         | (6C17) Sergeant (6A03)               | (361) 578-3463          |
| Admin Assistant                      | (512) 353-4245         | Admin Assistant                      | (361) 578-3405          |
| 1400 IH-35 North,San Marcos 78666    | Fax (512) 353-4986     | 8802 N Navarro, Victoria TX 77904    | Fax (361) 578-3447      |
| (6B12) Sergeant <i>(6A05)</i>        | (512) 997-4120         |                                      |                         |
| Admin Assistant                      | (512) 997-4142         |                                      |                         |
| 9000 N. IH-35.Austin 78753           | Fax (512) 997-4116     |                                      |                         |

Forms contained in this book can be copied and implemented in a motor carriers operation for regulatory compliance. In addition, the FMCSA has published MyPlanner at <u>https://csa.fmcsa.dot.gov/safetyplanner/</u> with templates to help motor carriers comply with federal safety regulations.EA

## Important WebsitesÁ

\* Hyperlinks marked with an "\*" have an underscore ("\_") where the underlined space appears.

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- P[, Ás[ Ádk cælofædt` &\ ð] \* Ás` •ð] ^•• ÑÁ <u>www.fmcsa.dot.gov/registration/getting-started</u>Á
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## Texas Highway Patrol Division Commercial Vehicle Enforcement

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  - https://www.sll.texas.gov/ (select Government, then Laws, then Codes)Á
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## To Obtain Forms:Á

Texas Department of Motor Vehicles (TXDMV):Á F毘ìì芭T X\*[ @Á介îì芭î JD <u>http://www.txdmv.gov</u>

#### United States Department of Transportation (USDOT):Á

https://www.fmcsa.dot.gov/mission/formsÁ

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Texas Highway Patrol Division Commercial Vehicle Enforcement

## Part 380 - Special Training Requirements

## 37 Texas Administrative Code 4.12(b)(8)Á

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## Entry Level Driver Training (Part 380, Subpart E, Sections 380.500 to 380.513)

## Compliance Timeline (380.501 - 380.509)Á

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## Training Areas (380.503)Á

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## Proof of Training (380.513)Á

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- ▶ Þæ{ ^Á[, -Ád;æ]] ā] \* Å[:[çãa^:/Ĺ]
- ➤ Tæājā)\*Ásæåå¦^••Á;Ásæãjāj\*Áj¦[çãå^¦L]
- ≻ Þæ{ ^A{ Aå¦ãç^¦;
- OEA cæe^{ ^ } of (3); Áse88[ låæ); &^ A; ão@ás@æeA;ã; c^ å Á; Ás@ Á;ð; æ¢A; |^ Dás@æeÁ;@ Aš; lã;^ | Á@æe Á8[ { ] |^ c^ å dæij: ð; \* Á;j Ás@ Á; æ); åæe^ å Á^ ` šā^{ ^ } o L
- ▷ V@A, \ā, c^åA, æ, ^A, A\$@A, ^\•[} A\$\exec^•cā, \* A\$@\exeA\$@A\$\\\arepsilon, \A^&^a, ^åA\$@A\$\\\arepsilon, a\$\\arepsilon, a\$\\\arepsilon, a\$\\\\arepsilon, a\$\\\arepsilon, a\$\\\arepsilon, a\$\\\\arepsilon, a\$\\\\\arepsilon, a\$\\\\arepsilon, - V@Áã}æč¦^ÁįÁ@Áj^!•[}Áœco\*•cāj\*Áœcó\*@Áå¦ãç^¦Á^&^ãç^åÅ@Ádæãjāj\*È

A copy of the Entry Level Driver Training Certificate or Diploma must be placed in the driver's personnel or qualification file. A motor carrier may use any form of certificate that substantially complies with 49 C.F.R. 380.513 is adequate.

| Entry-l                  | Level Driver Training Certificate  |
|--------------------------|--|
| I certify that           | (Name of Driver) has received training                                       |
| set forth in the Fe      | deral Motor Carrier Safety Regulations for entry-level driver                |
| tra                      | ining in accordance with 49 C.F.R 380.503.                                   |
| tra<br>Training Provider | ining in accordance with 49 C.F.R 380.503. Printed Name of Person Certifying |
|                          |  |
| Training Provider        | Printed Name of Person Certifying  |



## Part 382 - Controlled Substances and Alcohol Use and TestingÁ

## Applicability (382.103)Á

Ö¦ãç^¦•Á\^``āl^åÁq[Á@æç^ÁæÁÔÖŠÁæA^Ár`àb/&aÁq[Ác@A&q[}d[||^åÁr`à•æa)&^Áæ)åÁæ4&[@[|Ác^•cā]\*Á`|^•ÈÁV@ārÁ ¦^``ã^{ ^}oÁv¢c^}å•Áq[Ác@q•^Áå¦ãç^!•Á&`¦!^}d^Á&[ç^!^åÁà^Ác@Á\`|^ÉAg&|`åāj\*Ágic^!•ææ^Áæ)åÁgidæ•ææ^Á d`&\Áæ)åÁq[[q[¦Á&[æ&@4q]]^¦æaāj}•ÈÁ

Ò¢^{]cāį}•Á¦[{ Á,c@¦Á,zeto Á, Á^å^¦zetA ze^ĉ Á/\*č|zetā]}•Áå[Á,[ơÁzē]]|^Áξ(ÁÔÖŠÁze)åÁå¦č\*BzetAS[@[Á¢•cā]\*ÈÁ Ø[¦Á^¢zet[]|^ÊA zeS@Á[-Ác@Á[||[],ā]\*Áĉ]^•Á[-Á[]^¦zetā]}Á(č•oA cāļļÁ&[{]|^Á,ãt@Ázet|ÁÔÖŠÁze)åÁå¦č\*BzetAS[@[|Á ơ•cā]\*Áč|^•ÈÁ

- Ø^å^¦æ¢ÊÂUœæ^ÊÂ[&æ¢ÊÂæç)åÁçiãaæ¢Á[ç^¦} { ^} œÁQ¢&^] œÁ[{ Á[c@;|Á`|^•Á}å^¦Á+U€ÈÈ+ÇED
- Úláçæe\*ÁT[dːlÁÔællða'l•Á, Á;æ•^}\*^l•Ébaska' åðj\*Á&@l&@basha'l\*æjãæeða; \*
  Q¢&%] G4[{ ÁP[`'l•Á, ÁU^lçð&AÜ^&[lå ÁS^^]ðj\*Á`}å^lÁHJÍÈE; Gender
- >  $OI_{\pm}$   $ae_{ae_{\pm}} AO(2^{\Lambda}^{\Lambda}^{-1}) = AO_{\pm}^{+} DA_{\pm}^{+} a^{-} da^{-} AO_{\pm}^{-} a^{-} AO_{\pm}^{-} AO_{\pm}^{-} a^{-} AO_{\pm}^{-} 

## ExemptionsÁ

- Ö¦ãç^¦•Á\*¢^{] oÁ¦[{ ÁÔÖŠÁ^``ã^{ ^} @ Ás^Ás@ ã Áse` ã, \* Âùœe^
- ➢ OBBcāç^ÁsůčÁ, ậãæeh^Á,^¦•[}}^|
- > Covered Farm Vehicle Driver

## Types Of Alcohol And Controlled Substance Tests (Sections 382.301 - 382.311)Á

Post-Accident (382.303): OEÁ[[}ÁœÁ¦æ&cã&æà|^Á{||[], ā] \* Áæ) Áæ&&ãå^} oÁ§ç[|çā] \* ÁæÂÔT XÁ æ&@Á{]|[^^¦Á • @æ|Áx^• óÁ[¦Áæ|&[@]|Áæ) å Á&[}d[||^åÁ`à•æ) &^• Á æ&@Á`¦çãçā] \* Áŝ¦ãç^¦KÁ

- Y @ Á æ Á ^ :- [ :{ 3 \* Á æ^ ĉ Ë ^ : ããç ^ Á : } & cãt } Á ão@Á ^ ] ^ & oát [ Ás@ Áç^ @ B | ^ Éãs Ás@ Áse & sãa ^ } c 3; c[ | ç^ å Ás@ Á[ •• Á : - Á@ { æ} Áã^ LA ; ]
- Y @ Á^&^ãç^•Áxzé&ãzæaj } Á } å^¦ÁUcæe^Á; ¦Áj &æ¢Áæç Á; ¦Áxzé, [ça] \* Ástæ-a8záçaj |æaaj } Ástara aj \* Á; [ ć Áx@ æ8&ãa^} d25xá@ Áxze&ãa^} d4; [ ç^ å K
  - Ó[åā] Áāj bǐ l^Át[Áæ) ^Á, ^l•[}Á, @ É&æ Áæá^• č | cát Ás@ Áāj bǐ l^É&at { ^åãæe^|^Á^&c^ át aðæe ( ^åcæ ás& át aðæe) ^Á, ^åãæe ( ^åcæ ás& át aðæe) ^Á, ^åãæe ( ^åcæ ás& át aðæe) ^Át Ás@ Ásæ &ãa ^} d.4; l

| Type of AccidentÁ                      | Citation Issued to CMV driver:Á | Test must be performed by employer:Á |
|--|---------------------------------|--------------------------------------|
| P*{a))ÁØanaaa†áaĉÁ                     | ϔ^•Á<br>Þ[Á                     | → Ÿ^•Á                               |
| Ó[åā[Á5]bੱ¦^Ájāc@Ás[{^åãæez^Á(^åã&æekÁ | ϔ^•Á                            | → Ÿ^•Á                               |
| d^æe{^}có\$æçæêÁ{[{Ác@Ár&^}^Á          | Þ[Á                             | → Þ[Á                                |
| Öãræaàlā)*/&iaæ(æ*/Át[Áæ),^Át[[d[¦Á    | ϔ^•Á                            | → Ÿ^•Á                               |
| ç^@334/^Á^``ãā)*Át[,Áæ;æêÁ             | Þ[Á                             | → Þ[Á                                |

\*Testing rates are subject to change and can be viewed at <u>https://www.transportation.gov/odapc/</u> random-testing-rates.

#### A Texas Motor Carrier's Guide to Highway Safety

 $\begin{array}{l} V@\underline{A} U^{|A} \underline{A} \underline{A} + \frac{|A}{2} + \frac{|A}{2} \underline{A} + \frac{|A}{2} + \frac{|A}{2} \underline{A} + \frac{|A}{2} + \frac{|A}{2} + \frac{|A}{2} + \frac{|A}{2} \underline{A} + \frac{|A}{2} + \frac{|A$ 

Ďæ&@Á^{]|[^^¦Á:@æd¦Á^}•`¦^Ác@æcÁ;æ)å[{Ác∿•œÁ&[}å`&c^åÁ`}å^¦Ác@ãA];ædóÆd^Á`}æ)}[`}&^åÁæ)åÁc@æcÁ c@Áåæz^•Á{¦Áæå{ājãc^¦āj\*Áæ)å[{Ác∿•œÁæd^Á]¦^æåÁ^æ[}æà|^Ás@[`\*@[`ás@?[`\*@[`ás@?[`\*@[``\*@[``\*@[``\*@[``\*@[``\*@[``\*@[`

 $\begin{array}{l} \textbf{Reasonable Suspicion (382.307): } CE \acute{A}^{\{\]} \|[^{A}:\acute{A} @eq|\acute{A}^{*} ~ a^{\acute{A}} & e^{\acute{A}} & a^{\acute{A}} & a^{$ 

Return-to-Duty (382.309 and Part 40, Subpart O):  $Oas @^{1} [^{+} @= |A^{+} @= |A^{+} = |A^{+} A^{+} @= |A^{+} = |A^{+} A^{+}  

#### Retention of Records (382.401)Á

#### Five Years:Á

- > O[[8] @ |Ác^• oÁ^• \* |o Á§ å ã8æe3] \* ÁsaÓ / ^ æe@Á0[[8] @ |ÁÔ[ } &^} d æe3] } ÁÇÓ OEÔ DÁ , ÆEEGA | Á ¦ ^ æc^|È
- ≻ X^¦ãã\åÁ,[•ãããç^Áå¦č\*Á\$\•oÁ^•č|@
- Ü^~~•æ
  Ág Á
  á/ág Á
  á
- ➢ Öláç∧lÁnçæ, œãų ) Ásej åÁn ∧llæ,
- Ôæţäa ¦æzāį } Ásu [& { ^} cæzāj }
- Ü^8[¦å•Ă^/æe^åAţ Áœ Áæå ( jā ã dæati ) A Áœ Áæð8[@ [Aæ) å A8[ ) d[ ||^åA`à•æ) 8 A• Av• æ A + [\* |æ + Êæ) å
- > OEAS[]^Á, Á>áæ&@ase)}迢A\$åæA^ååá^č { { æ5 Á^č ăå^åÅa`Åa`Aà HÌ GÈE €HÁÇŸ[čÁ, ã|Ása^Á, [cããð åÁsî ØT ÔÙOEÁSAÁ[čÁsd~ÁA´čã^åAá[Ásu'^æe^Đ)æã]æãã Ás@ã DÈ

#### Three Years:Á

## <u>Two Years:</u>Á

- Ü^&[ \\ \aten \A^ \\ \aten - Ü^8[ ¦å•Áî, -Á^~ ă^åÁ: æŋā] \* Áî, -Á8[ ||^8cā] } Áî, ^!•[ } } / Á: @eq|Ás/Á.^] o/si ' ¦ā] \* Ás@ Ásā; ^Ás@ Ásā; âā; ãā ` æq ] ^!-{ !{ • Ás@ • ^ Ár } 8cā] } • Ésen; å Á[ ¦Á; [ Á ^ æt+Ásæor !; ætå• È

## One Year:Á

- > Þ^\* æãç^Áæ) å Á&æ) &/|^å Á&[ } d[ ]|^å Á` à• œ) &/ Á\* óÅ ` [o
- > OEA @ |Áx ÓÁ \* |0 Á å å ææð \* Á æÓ OEÔ Á Á • Á @ A ÁEEG

## Access to Records (382.405)Á

 $\begin{array}{l} C = \left[ \dot{A}^{*} & \dot{a}^{*$ 

## Inquiries to Previous Employers (382.413)Á

OEA([d[¦Á&a⇔l¦ã\¦Á•@eqh|Áa); čā^Áæà[čơAc@A{[||[]ā]\*Áa)-{[¦{aeaā]}A[}ÁæAålāç^¦Á+[{Ác@·Áålãç^¦qAji\*Ac@A] ^{]|[^^¦•Á{[¦ÁæAý]^lā[åA[,Ác@^^Aî^æ+Aji¦^&^å]\*Ác@Aålãç^!qAåæevA[,Áæa]]|a8aeaā]}ÈEŸ[čÁ(č•oÁ[àcæa5]Ác@A ålãç^!qA,lãuc^}Áxečo@[lãæaā]}Áa1•dÈŸ[čÁ[æÂ][ơÁæq|[]Áæ)^[}^Á,@[Á^~ě^•Aí[Ářãç^Á,lãuc^}Áxečo@[lãæaā]}Ád[Á []^¦æevÁæA&[{{ ^¦&ãæqAí[d]¦Áç^@a&|^ÈĂ

- > O[[8] @[ |Áe^• œ Á ã@ÁexÁ^• ĭ | oÁ ÁE] El Ásq8[ @] |Á8[ } 8^} dæaā } A i | Á i / Aæ^ i L
- X^¦ããàảÁ,[•ãããç^Á&[}d[||^åÁ\*à•œa) & \* Á\*\*•Á\*\*\*\* (o•Láa) å

## Employer Obligation to Promulgate a Policy (382.601)Á

- (a) General requirements. Òæ&@Á^{]|[^^¦Á•@æ¢|Á]¦[çãå^Á^å`&ææāį}}æ¢Á{ æe^¦ã梕Ác@æeÁ^¢]|æājÁc@ ¦^``ã^{ ^} œ`Áį Ác@ãrÁj æidÁæ)åÁc@Á?{]|[^^¦œ;Áj[|ã&ã••Áæ)åÁj¦[&^å`¦^•Áj ãc@Á^•]^&cÁţ Á( ^^cāj\*Ác@•^ ¦^``ã^{ ^} œ`È

  - @CD Òæ&@Á\; [ˈ}À^^^]] [[ˈ}À^^^]] [[ˈ}A^^^]] [[ˈ}A^^A]; [cæx {A•[A]]; [A^w]; [A
- Gad Required content. V@Á( غَدْمُ اللَّهُ اللَّهُ اللَّهُ اللَّهُ اللَّهُ اللَّهُ اللَّهُ اللَّهُ اللَّهُ الْمُ اللَّهُ اللَّ عند اللَّهُ اللَّ اللَّهُ عَلَيْ عَلَيْ اللَّهُ اللَّهُ عَلَيْ اللَّهُ عَلَيْ اللَّهُ عَلَيْ اللَّهُ ع مَا اللَّهُ اللَّهُ اللَّهُ اللَّهُ اللَّهُ اللَّهُ اللَّهُ اللَّهُ عَلَيْ اللَّهُ عَلَيْ اللَّهُ اللَّهُ اللَّ
  - @FDV@A\$a^}caccْAj^;^kA@Aj^¦•[}As^•ãt}ææ^åAsîAc@A^{]|[^^¦A(jAep)•,^¦Aslaç^¦A´`^•cāt}+Áæà[čA6@ {ææ^¦ãæф•L
  - $(CDV@A$&ae^*[+a^{+},4]ae^{+$

  - ÇDÙ]^&ãã&Áşi-{¦{ æeşi}}Á&[}&^\}∄;\*Ás¦ãç^\Á&[}å`&oÁo@æex/ãerÁ¦¦[@ãããe^åÁsîÁs@ãerÁ;æe¦d\_
  - ý DV@ Á&a& {•caa) & A`}å^¦Á, @3&@Áeebá¦ãç^¦Á,ā|Áà^Ác>• c^åÁ{¦Áæ4&[@[|Áæa)å⊕[Á&[}d[||^åA\*`à•caa) & ^• `}å^¦Á@ãÁjædŒáa) & j`åāj\*Áj[•dĒæa&ãa^}cA\*o•cāj\*Á}å^¦Á<u>HÌCHEHGaD</u>L

  - ĘĂå^¦∿s vēĘ }åæA vo•vA •v& (kāo•kš<sup>4</sup>Åå^||]b{]aÅå (kæÀ (kā) (p)]& kæÀ (kāč }áš (kāč) (kāč) (kāč) (kāc) (kāc

  - (F=ED V@Á&[}•^``^} &^•Á[¦Á\$ilãç^¦•Á[č] åÁt[Á@æç,^ÁæjÁæd&[@[|Á&[} &^} dæāt]}Át[ÁEEGAt[At |^æ\*¦Áà`d4(\*• c@æ)ÁEEIL

ÇFFD Q, -[ \{ aæāi \} Á&[ \} &^\] āj \* Ác@ Á^~^&o (A] Áæqk&[ @[ |Áæð) å Á&[ \} d[ ||^å Á\*`à•cæð) &^• Á`•^A[ \} Áæð) Áāj å ãçãa čæqe @ acto@ÉA\_[ [ \\ ÉÉæð) å Á] ^\=[ \} adA[ã^LÁ\*ā] • Áæð) å Á\* ^{ \} ] d[ { • Á[ -Áæð) Áæqk&[ @[ |Á[ \ÁæóA&[ \} d[ ||^å Á\*`à•cæð) &^• ] \[ à|^{ \ Áç@ /å\|āç^\=q Á[ \Áæó&[ Ë] [ \\^\=q DLÁæð) å Áæçæājææb|^Á, ^c@l å•Á, Áaj c^\=c^\}āj \* Á\_@ \Aæð) Áæqk&[ @[ |Á| \Áæ 8[ \} d[ ||^å Á•`à•cæð) &^• Á] \[ ä|^{ \{ A ær Á • `e] ^&c^ åEA aj &|` åāj \* Á &[ \} ~{[ \} cæaāi \} EA \^~\| aqA[ d[ A æ) ^ ^{ \] [ ] (^^ 羥e\*ācæð) &^A[ \] [ `a|^{ \{ A ær Á • `e] ^&c^ åEA aj &|` åāj \* Á &[ \} ~{[ \} cæaāi \} EA \^~\| aqA[ d[ A æ) ^ ^{ \] [ ] (^^ 羥e\*ācæð) &^A[ \] [ \* ]æ Áæð) å Ái \A^~\| ædA[ A æ] æ\* ^{ \} ^ \] dE

(12) The requirement that the following personal information collected and maintained under this part shall be reported to the Clearinghouse:

(i) A verified positive, adulterated, or substituted drug test result;

- (ii) An alcohol confirmation test with a concentration of 0.04 or higher;
- (iii) A refusal to submit to any test required by subpart C of this part;
- (iv) An employer's report of actual knowledge, as defined at §382.107:
  - (A) On duty alcohol use pursuant to §382.205;
  - (B) Pre-duty alcohol use pursuant to §382.207;
  - (C) Alcohol use following an accident pursuant to §382.209; and
  - (D) Controlled substance use pursuant to §382.213;

(v) A substance abuse professional (SAP as defined in §40.3 of this title) report of the successful completion of the return-to-duty process;

(vi) A negative return-to-duty test; and

- (vii) An employer's report of completion of follow-up testing.
- Q&D Optional provision. V@Á(æe^¦ãed+Á+`]]|ð\åÁd(Áå¦ãç^\+Á(æ)Ád+[Áð;&\`å^Áð;-{; {{æeā}}Å[}Áæ;åãaā;}æ; ^{{]|[^^;A]Á][|ã&ð+Á,ãc@A;^•]^&cÁd;Ác@A`+^Á[-Áæ&&[@[|Á[;Á&[]}d[||^åÁ+`à+cæ;&^+ÉAj&\`åB;\*Áæ; &[}+^``^}&-A[;!Áæ&åiãç^;A[`}åÁt;Ác@+c;^ÁcæA;]^&ãðàÁæ&[@[|Á[;!Á&[]}d[||^åÁ+`à+cæ;&^+Á^c,^|Éc@eeA±A^ àæ=^åÁt]}Ác@A^{{]|[^^;efAæ`c@[;ãĉÁð;å^]^}å^}cÁ[-Ác@a\*Á]æ;AiæACB;^Á+`&@Áæååãaãa;}æ;A][|ã&ð+Á[; &[}+^``^}&-A(`\*-A±A);A][][^^;efAæ`c@[;ãĉÁð;å^]^}å^}cÁ[-A±A+A]CB;^A+A+A+A][]][]ã&ð+Á[; &[}+^``^}&

## Supervisor Training (382.603)Á

OE‡|Á]^¦•[}•Áå^•ā\*}ææs^åÁq[Á•`]^¦çãa^Áå¦ãç^¦•Á'^&&rãg∿Áæák(ājā[`{Á[-Á΀Á(āj`ơ •Á[-Ádæājāj\*Á[}Áœ4&[@[|Á {ãi`•^Áæ)åÁæ)Áæååãaāj}ædÁ΀Á[āj`ơ •Á[-Ádæājāj\*Á[}Á&[}d[||^åÁ•`à•œa)&^•Á`•^ĚÁV@ Á•`]^¦çãr[¦Á]á|Á`•^Á ơ@ãÁdæājāj\*Áq[Áå^ơ·¦{āj^Á\_@`ơ@~¦Á'^æe[}æà|^Á•`•]ā&āį}Á^¢ãro:Áq[Á'^``ā^Áæáå¦ãg^\¦Áq[Á`}å^¦\*[Áơ•oāj\*Á `}å^¦ÁÙ/&cāj}ÁnÌOEÈHEÏĖÁ

## Reports of Valid Positive Results on Alcohol and Drug Tests (37 TAC 4.21)Á

ĢaĐÜ^] [ ¦cāj \* ÁÜ^ ˘ ã^{ ^} dĚAOE; Á^{ ] || ^ \ Á\ ´ ă^åA` } å^ ¦ Ác@ Á-^å^ ¦æ4 æ^ ĉ Á\ \* č |æeāj } • Ád[ Á&[ } å č & æk&[ @[ |Áæ) åÁ&[ } d[ ||^åÁ• č à• cæ) & Ác • cāj \* Á[ -Á^{ ] || ^ ^^• Á @ee||Á\^] [ ¦cÁd[ Ác@ Áå^] æld( ^} cÁzé ] [ • ãtāţ^ Á.^ č |cf] } Áæ) Áæk&[ @[ |Á[ ¦Á&[ } d[ ||^åÁ\* č à• cæ) & Ác • c4] ^ ¦ { ^ åÁæe Á] æld[ } æda[ Ac@ Á&æl ã \ CÁæk& ] [ • ãtāţ^ Á.^ č |cf] } Áæ) Áæk&[ @[ |Á[ ¦Á&[ } d[ ||^åÁ\* č à• cæ) & Ác • c4] ^ ¦ { ^ åÁæe Á] æld[ } æda[ Ac@ Á&æl ã \ CÁæk& ] [ • ãtāţ^ Á.^ č |cf] } Áæ) Áæk&[ @[ |Á[ ¦Á&[ } d[ ||^åÁ\* č à• cæ) & Ác • c4] ^ \ { ^ åÁæe Á] æda[ Ac@ Á&æl ã \ CÁæk& ] @ | æ) å Áå¦ č Ác • cāj \* Á] |[ \* ¦æt Á[ ¦Á&[ } e[ ¦cã { Étæe Áå^ -āj ^ åÁaî Á/āt|^ ÁI JÉO[ å ^A[ AØ^ å^ \ æ4\ü HÌ GÊ4[ } Áæ) Á^{ { ] |[ ^ ^ Á[ -Ác@ Á&æl ã \ Á, @ Á@ |å• ÁæA&[ { { ^ \&ãædÁå å āţ ^ \ [Á]ā&^} • ^ Áã • č ^ åĂĭ } å^\ Á\ ¢æ V¦æ) •] [ ¦cææāj } ÁÔ[ å^ÉÔ@æj c' lĂ GCÈ

ÇFDV@Á^][¦ơÁ, ઁ•ơÁa^Á, à{ãư °å/ái Â\*{]|[^^¦•Á, ãu@a)ÁF€Áåæê•Á, Á^&^ãçã, \*Á,[cã&^Á, Á∞áçædãáA][•ãuã;^ ¦^•ĭ|ơÁ, Áæd&[@2|Á,;¦Áa;¦×\*Á\*•ơÁ,^¦-{;{ ^{ | { ^ 8 C}

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#### \*IMPORTANT NOTE\*

Although the FMCSA has established a Drug and Alcohol testing result clearinghouse, a motor carrier is still required to report all positive test results to the Texas Department of Public Safety (37 TAC 4.21).

| E Deserve  | REPORT OF VALID POSITIVE RESULT ON<br>ALCOHOL TEST UNDER TRC 644.252  |           |                           |                 |              |                  |  |  |
|--|---|-----------|---------------------------|-----------------|--------------|------------------|--|--|
| 100  | NAME OF MOTOR CARRIER   | ST UI     | NDER TRC 6                | 644.25          |              | Alcohol Test     |  |  |
| D  | Name of Individual Tested   | SOCIAL    | Security Number           | CDL NUMBE       |              | BIRTHDATE        |  |  |
| А.   |   |           |                           |                 |              |                  |  |  |
|  | INSTRUCTIONS FOR THE COMPLETION OF THE<br>REPORT OF POSITIVE ALCOHOL TEST UNDER TRC 644.252:  |           |                           |                 |              |                  |  |  |
|  | TO THE MOTOR CARRIER  |           |                           |                 |              |                  |  |  |
| INSTRUCTIONS   | 1. You must complete and sign the "Certificate of Motor Carrier" section.   |           |                           |                 |              |                  |  |  |
|  | 2. You must attach a legible copy of the completed federal Alcohol Testing Form with the screening and confirmation test results included or affixed. If the donor refused to provide a specimen, you do not need documentation from the Breath Alcohol Technician (BAT).   |           |                           |                 |              |                  |  |  |
| B. INSTF   | <ol> <li>Deliver or mail this form and the supporting documentation to: MCS Section Supervisor, Motor Carrier<br/>Bureau, Texas Department of Public Safety, 6200 Guadalupe, MSC# 0521, Austin, Texas 78752-4019.</li> <li>Legible copies may be sent by facsimile /email to 512-424-5310 or MCB.VPR@dps.texas.gov</li> </ol> |           |                           |                 |              |                  |  |  |
|  | <ol> <li>Retain a copy of this form and the completed Alcohol Testing Form in the Motor Carrier records as<br/>required by 49 CFR Parts 40 and 382 (or other parts applicable to CDL holders).</li> </ol>   |           |                           |                 |              |                  |  |  |
|  | 5. You must forward this report to the depart   | rtment    | within <b>ten</b> days of | receiving th    | ne complet   | ed test results. |  |  |
|  | By signing below, I the authorized representative of  | of the Mo | otor Carrier listed abo   | ove, certify th | ne following | 1:               |  |  |
|  | 1.Á The Motor Carrier listed above: Has an in-house drug and alcohol testing program that meets the federal requirements of 49 CFR Parts 40 and 382 (or other parts applicable to CDL holders); <b>OR</b>   |           |                           |                 |              |                  |  |  |
| R  | <ul> <li>Is a member of a consortium, as defined in 49 CFR 382.107, that provides drug and alcohol testing that meets the federal requirements of 49 CFR Parts 40 and 382 (or other parts applicable to CDL holders).</li> <li>NAME OF CONSORTIUM:</li> </ul>   |           |                           |                 |              |                  |  |  |
| <b>CERTIFICATE OF MOTOR CARRIER</b>                            | <ul> <li>2. The individual tested is subject to alcohol testing by the Motor Carrier, and was tested for the following reason:</li> <li>Random Reasonable Suspicion Post-Accident Return to Duty Follow-up Pre-employment</li> <li>Other:; AND</li> </ul>   |           |                           |                 |              |                  |  |  |
| ICATE OF M   | Had a 0.04 or more breath alcohol level under 49 CFR Parts 40 and 382 (or other parts applicable to CDL holders) ( <b>NOTE:</b> a copy of the federal Alcohol Testing Form must be provided, with the screening and confirmation test results included or affixed to the federal Alcohol Testing Form); <b>OR</b>             |           |                           |                 |              |                  |  |  |
| ERTIF  | Refused to submit to an alcohol test ( <u>NOTE:</u> Supporting documents not required)  |           |                           |                 |              |                  |  |  |
| с. с   | I further certify that I have reviewed the motor carrier's records and that the information contained in this certificate is true and correct to the best of my knowledge.  |           |                           |                 |              |                  |  |  |
|  | PRINTED NAME OF DESIGNATED MOTOR CARRIER REPRESE  | NTATIVE   |                           |                 | Tele         | PHONE NUMBER     |  |  |
|  | Address   |           |                           |                 |              |                  |  |  |
| SIGNATURE OF DESIGNATED MOTOR CARRIER REPRESENTATIVE CITY<br>X |   |           |                           |                 | State        | ZIP CODE         |  |  |

Mail form/attachments to the MCS Supervisor, Motor Carrier Bureau, Texas Department of Public Safety, 6200 Guadalupe, MSC# 0521, Austin, Texas 78752-4019, FAX LEGIBLE copy to 512-424-5310 or email to MCB.VPR@dps.texas.gov.

# INSTRUCTIONS FOR THE COMPLETION OF THE REPORT OF POSITIVE ALCOHOL TEST UNDER TRC 644.252:

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- 1. You must complete parts A & B of this form, including an original signature in Part B.
- 2. You must attach a copy of the Alcohol Testing Form with Steps 1-4 completed. If the employee refuses to sign in Step 4, you must note that in the REMARKS section of Step 3. The results of the screening test and the confirmation test must be printed on or affixed to the copy of the Alcohol Testing Form attached to the Report of Positive Alcohol Test Under TRC 644.252.
- If this report is completed on a self-employed driver, deliver or mail this form, along with the supporting documents, to MCS Section Supervisor, Motor Carrier Bureau, Texas Department of Public Safety, 6200 Guadalupe, MSC# 0521, Austin, Texas 78752-4019. O may be sent by facsimile to 512-424-5310.
- 4. Retain a copy of this form and the completed Alcohol Testing Form.

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5. Please forward your report to the carrier (or to the department if the carrier is an owner-operator) within days of completing the test results.

#### <u>u\u=-U\u\k#°kk@k</u>

a.

- 1. \
  - @ inform the BAT who verified the positive alcohol test result that he/she must complete and sign the "Certification of Breath Alcohol Technician" section, and provide you with either a copy of the Federal Drug Testing Custody and Control Form with Step 6 completed, or a report form on the BAT's letterhead and bearing the BAT's signature showing the result of the test. A report on the BAT's letterhead must contain a statement that the BAT complied with 49 CFR Parts 40 and 382 (or other parts applicable to CDL holders).
  - b. @ you do not need documentation from the BAT.
- 2. After receiving the completed "Certification of Breath Alcohol Technician" section and supporting documents, you must complete and sign the "Certificate of Motor Carrier" section.
- 3. You must attach a legible copy of the completed federal Alcohol Testing Form with the screening and confirmation test results included or affixed.
- Deliver or mail this form and the supporting documentation to: MCS Section Supervisor, Motor Carrier Bureau, Texas Department of Public Safety, 6200 Guadalupe, MSC# 0521, Austin, Texas 78752-4019.
   O may be sent by facsimile to 512-424-5310.
- 5. Retain a copy of this form and the completed Alcohol Testing Form in the Motor Carrier records as required by 49 CFR Parts 40 and 382 (or other parts applicable to CDL holders).
- 6. You must forward this report to the department within days of receiving the completed test results.

| <b>REPORT OF VALID POSITIVE RESULT</b> | ON |
|--|----|
| DRUG TEST UNDER TRC 644.252            |    |



|  | NAME OF MOTOR CARRIER   |                                    |                  | DATE OF DRUG TEST |                 |  |  |
|--|---|------------------------------------|------------------|-------------------|-----------------|--|--|
| A. ID  | Name of Individual Tested   | Social Security Number             | CDL NUMBER       | & State           | Birthdate       |  |  |
| INSTRUCTIONS FOR THE COMPLETION OF THE<br>REPORT OF POSITIVE DRUG TEST UNDER TRC 644.252:<br><u>TO THE MOTOR CARRIER</u>   |   |                                    |                  |                   |                 |  |  |
| INSTRUCTIONS   | 1. You must complete and sign the "Co   | ertificate of Motor Carrier" se    | ection.          |                   |                 |  |  |
|  | <ol> <li>You must attach a legible copy of the signed the Federal Drug Testing, Custody and Control Form<br/>(with at least steps one through six completed) or the MRO's signed report of positive controlled<br/>substance result. If the donor refused to provide a specimen, you do not need documentation from<br/>the MRO.</li> </ol> |                                    |                  |                   |                 |  |  |
| B. INSTRI  | <ol> <li>Deliver or mail this form and the supporting documentation to: MCS Section Supervisor, Motor Carrier<br/>Bureau, Texas Department of Public Safety, 6200 Guadalupe, MSC# 0521, Austin, Texas 78752-4019.</li> <li>Legible copies may be sent by facsimile /email to 512-424-5310 or MCB.VPR@dps.texas.gov</li> </ol>               |                                    |                  |                   |                 |  |  |
|  | <ol> <li>Retain a copy of this form and the Federal Drug Testing, Custody and Control Form and/or the MRO's<br/>report of positive controlled substance result in the Motor Carrier records as required by 49 CFR,<br/>Parts 40 and 382 (or other parts applicable to CDL holders).</li> </ol>  |                                    |                  |                   |                 |  |  |
|  | <ol> <li>You must forward your report to the results.</li> </ol>  | e department within <b>ten</b> day | s of receiving   | the comp          | eted test       |  |  |
|  | By signing below, I the authorized representative   | ve of the Motor Carrier listed ab  | ove, certify the | e following:      |                 |  |  |
| 1.Á The Motor Carrier listed above: Has an in-house drug and alcohol testing program requirements of 49 CFR Parts 40 and 382 (or other parts applicable to CDL holders); <b>OR</b>   |   |                                    |                  |                   | s the federal   |  |  |
| ER   | Is a member of a consortium, as defined in 49 CFR 382.107, that provides drug and alcohol testing that meets the federal requirements of 49 CFR Parts 40 and 382 (or other parts applicable to CDL holders). NAME OF CONSORTIUM:  |                                    |                  |                   |                 |  |  |
| TOR CARRIER  | 2. The individual tested is subject to drug testing by the Motor Carrier, and was tested for the following reason:     Random Reasonable Suspicion Post-Accident Return to Duty Follow-up Pre-employment     Other:; AND  |                                    |                  |                   |                 |  |  |
| CERTIFICATE OF MOTOR   | Tested positive for a prohibited drug under 49 CFR Parts 40 and 382 (or other parts applicable to CDL holders) ( <b>NOTE:</b> a copy of the federal drug testing custody and control form or the MRO's report of positive controlled substance result must be attached); <b>OR</b>  |                                    |                  |                   |                 |  |  |
| Refused to submit to a controlled substance test ( <u>NOTE</u> : Supporting documents not require  |   |                                    |                  | not require       | d)              |  |  |
| U further certify that I have reviewed the motor carrier's records and that the information<br>U certificate is true and correct to the best of my knowledge.  |   |                                    |                  | rmation co        | ntained in this |  |  |
| PRINTED NAME OF DESIGNATED MOTOR CARRIER REPRESENTATIVE TELEPH   |   |                                    |                  |                   | one Number      |  |  |
|  | Address   |                                    |                  |                   |                 |  |  |
|  | SIGNATURE OF DESIGNATED MOTOR CARRIER REPRESENTATIVE CITY STATE ZIP CODE X  |                                    |                  |                   |                 |  |  |
| Mail form/attachments to the MCS Supervisor, Motor Carrier Bureau, Texas Department of Public Safety, 6200 Guadalupe, MSC# 0521, Austin, Texas 78752-4019, FAX LEGIBLE copy to 512-424-5310 or email to MCB.VPR@dps.texas.gov. |   |                                    |                  |                   |                 |  |  |



## RELEASE OF CDL HOLDER'S REPORTED POSITIVE ALCOHOL OR CONTROLLED SUBSTANCE TEST RESULTS



| Use this form to obtain the CDL | holder's reported positive | alcohol or controlled s | substance |
|---------------------------------|----------------------------|-------------------------|-----------|
|                                 | test results information.  |                         |           |

This form should <u>ONLY</u> be used if you wish to <u>inquire</u> whether or not a prospective driver (CDL Holder) has had a positive alcohol or controlled substance test result reported to the Texas Department of Public Safety in compliance with state law.

## THIS FORM IS <u>NOT</u> REQUIRED FOR <u>REPORTING</u> A POSITIVE ALCOHOL OR CONTROLLED SUBSTANCE TEST.

1. This form must be completed in full and include the driver's <u>original</u> signature. *AElectronic signatures will not be accepted*)

| 2. Deliver, mail or FAX the completed form to:<br>Texas Department of Public Safety<br>Motor Carrier Bureau, MSC #0521<br>6200 Guadalupe, Building P<br>Austin, Texas 78752-4019 / Facsimile: 512-424-5310<br>Email: MCB.VPR@dps.texas.gov | Check here if CDL Holder<br>is requesting results on self |
|--|---|
| Print Name of CDL Holder   | Phone Number  |
| Print full Address, City, State and Zip  | of CDL Holder   |
| Driver License Number of CDL Holder  | State Date of Birth                                       |
| authorize release of the CDL holder's report<br>controlled substance test results report   |   |
| Print Motor Carrier's Name   | Phone Number  |
| Print full Address, City, State and Zip o  | of Motor Carrier  |
| Signature of Driver  | Date  |
| X  |   |

If you wish to request and receive this information by electronic mail, submit a completed and notarized Electronic Mail Verification Form (MCS-32), available at the following web address: <a href="http://www.dps.texas.gov/forms/index.htm">http://www.dps.texas.gov/forms/index.htm</a>.

## FMCSA Drug and Alcohol Clearinghouse (382.701 – 382.727)

The clearinghouse is aimed at improving road safety by providing FMCSA and employers with the necessary tools to identify drivers who have violated federal drug and alcohol testing program requirements and are prohibited from operating a Commercial Motor Vehicle. The goal of the clearinghouse is to ensure that such drivers receive the required evaluation and treatment before they have the opportunity to resume driving. The clearinghouse was implemented on January 6, 2020 and mandated by Congress (MAP-21, Section 32402).

The final rule can be viewed at https://clearinghouse.fmcsa.dot.gov/About.

## Key information regarding the clearinghouse:

- Database contains CDL/CLP drivers' drug and alcohol violation information
- Violations are reported by employers and medical review officers (e.g., positive tests, refusals, etc.)
- Includes whether a driver has successfully completed the mandatory return-to-duty (RTD) process following a violation
- Clearinghouse information is not available to general public
- Only authorized users will be able to access the Clearinghouse for designated purposes
- Other enforcement agencies, such as State Driver's Licensing Agencies and State law enforcement agencies, will receive only driver eligibility status (i.e, Prohibited/Not Prohibited)
- All Employers (including Owner-Operators) may designate a C/TPA to conduct queries, and/or report violations, and/or report Return-To-Duty information.
- Owner-Operators must designate a C/TPA to report violations incurred by owner-operator.

## Who will use the Clearinghouse?

- Drivers who hold commercial driver's licenses (CDLs) or commercial learner's permits (CLPs)\*
- Employers of CDL drivers who operate commercial motor vehicles (CMVs)
- Consortia/Third-Party Administrators (C/TPAs)
- Medical Review Officers (MROs)
- Substance Abuse Professionals (SAPs)
- State Drivers Licensing Agencies (SDLAs)

## Information contained by Clearinghouse

The Clearinghouse will contain only drug and alcohol program violation information for employees subject to the testing requirements under the FMCSRs in **49 CFR Part 382** (no other DOT modes).

- The Clearinghouse will only contain violations that occur on January 6, 2020 or later.
- Violation information will be retained in the Clearinghouse for 5 years, or until the RTD follow-up testing has been completed, whichever is later
- A drug and alcohol program violation can be recorded even if the driver is not registered in the Clearinghouse
- The Clearinghouse will associate the violation with the driver's CDL information
- MROs and SAPs have reporting functions only
- Cannot access driver violation records, due to privacy requirements
- Can review violation information they or their Assistants have entered in the Clearinghouse.

## What actions will users take in the Clearinghouse?

Authorized users must register in the Clearinghouse to conduct the following actions:

- **Record** Drivers' drug and alcohol program information in the Clearinghouse
- **Consent** Authorization to conduct a query
  - Requested by employers or designated C/TPAs
  - Provided or refused by drivers
- Query Determine if the Clearinghouse contains any records for the queried driver

## To access and learn more about the specific actions each user can take at visit <u>https://clearinghouse.fmcsa.dot.gov/Resource/Index/User-Roles.</u>

The Clearinghouse will maintain a history of an employer's full and limited queries, including those conducted by a designated C/TPA.

- This will include records of the driver's response to consent requests for full queries
- Employers will need to retain records of drivers' limited consent for 3 years
- Employers must purchase a query plan to enable their users or their designated C/TPAs to conduct queries.
- Query plans may only be purchased from the Clearinghouse website
- C/TPAs cannot purchase query plans

## **Reporting to the Clearinghouse (382.705)**

Below is an outline of reporting entities when required information will be reported to the Clearinghouse:

## Prospective/Current Employer of CDL Driver

- > An alcohol confirmation test with a concentration of 0.04 or higher
- > Refusal to test (alcohol) as specified in 49 CFR 40.261
- Refusal to test (drug) not requiring a determination by the MRO as specified in 49 CFR 40.191
- Actual knowledge, as defined in 49 CFR 382.107, that a driver has used alcohol on duty, used alcohol within four hours of coming on duty, used alcohol prior to post-accident testing, or has used a controlled substance
- > Negative return-to-duty test results (drug and alcohol testing, as applicable)
- Completion of follow-up testing

## Service Agent acting on behalf of Current Employer of CDL Driver

- > An alcohol confirmation test with a concentration of 0.04 or higher
- Refusal to test (alcohol) as specified in 49 CFR 40.261
- Refusal to test (drug) not requiring a determination by the MRO as specified in 49 CFR 40.191
- Actual knowledge, as defined in 49 CFR 382.107, that a driver has used alcohol on duty, used alcohol within four hours of coming on duty, used alcohol prior to postaccident testing, or has used a controlled substance
- Negative return-to-duty test results (drug and alcohol testing, as applicable)
- Completion of follow-up testing

## Medical Review Officer

- > Verified positive, adulterated, or substituted drug test result
- > Refusal to test (drug) requiring a determination by the MRO as specified in 49 CFR 40.191

## Substance Abuse Professional

- Identification of driver and date the initial assessment was initiated
- Successful completion of treatment and/or education and the determination of eligibility for return-to-duty testing

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There are two types of queries - Limited & Full. All queries require driver sent. Employers or their designated C/TPA will be required to conduct queries to check if current and prospective employees are prohibited from performing safety-sensitive functions, such as operating commercial motor vehicles (CMVs) due to an unresolved drug and alcohol program violation

| motor vehic | motor vehicles (CMVs), due to an unresolved drug and alcohol program violation. | esolved drug and alco   | hol program violation.   |  |
|-------------|---|---|--|--|
| Query       | Reason for Query  | Consent   | <b>Consent Responses and</b>   | Query Results and Required Actions   |
| Type        |   | Requirements  | Required Actions   |  |
| LIMITED     | Annual Check on<br>currently employed<br>driver<br>OR                           | Outside the<br>Clearinghouse<br>May be electronic<br>or wet signature                       | <ul> <li>Consent refused:</li> <li>Query cannot be conducted</li> <li>Driver removed from safety-<br/>sensitive functions</li> </ul> | No records found in the Clearinghouse for<br>queried driver  |
|             | Ad hoc/periodic check<br>on driver  | Limited consent<br>form must specify<br>time range  | <ul> <li>Consent provided</li> <li>Retain via paper or electronically in driver's qualification file</li> </ul>                      | <ul> <li>Full query needed</li> <li>Full query must be conducted for violation and/or return-to-duty (RTD) details to be released</li> </ul>                 |
|             |   |   | <ul> <li>Request limited query in the<br/>Clearinghouse</li> </ul>   | <ul> <li>If full query is not conducted within<br/>24 hours, driver is removed from<br/>safety-sensitive functions, including<br/>operating a CMV</li> </ul> |
|             | Pre-employment check<br>on prospective driver<br>OR                             | Electronically within<br>the Clearinghouse,<br>for each full query<br>for individual driver | Consent refused <ul> <li>Employer notified of refused consent</li> </ul>   | <ul><li>Prohibited</li><li>If driver has a violation and no negative RTD test result, driver is</li></ul>  |
| FULL        | Limited query returned<br>records found for<br>queried driver                   |   | <ul> <li>Query cannot be conducted</li> <li>Driver cannot perform/removed from safety-sensitive functions</li> </ul>                 | removed from safety-sensitive<br>functions<br>Not Prohibited   |
|             | OR<br>Ad hoc/periodic check<br>on driver  |   | Consent provided   | <ul> <li>If a driver has no violations, or a violation and a negative RTD test result, no action required</li> </ul>   |
|             |   |   | <ul> <li>Full violation and/or RTD details released, if any</li> </ul>   |  |



Texas Highway Patrol Division Commercial Vehicle Enforcement

## Part 383 - Commercial Driver License

The licensing provisions in Part 383 and Texas Transportation Code Chapter 522 are intended to help reduce accidents by setting standards that:

- Require commercial drivers to be properly qualified and to hold a single valid CDL; and
- Disqualify drivers who do not operate CMV safely.

Note: Texas adopted Part 383 by administrative rule on September 14, 2016. The Texas CDL provisions in Texas Transportation Code Chapter 522 are similar to Part 383 and where there is a conflict between Texas Transportation Code Chapter 522 and FMCSR Part 383, statute will prevail over the Federal Regulation.

Beginning September 1, 2009, when a vehicle is loaded so that the vehicle and the load weight exceed any weight limit listed in this Chapter, the applicable CDL will be required to operate that vehicle even if the Gross Vehicle Weight Rating (GVWR) or Gross Combination Weight Rating (GCWR) is below the weight limit.

## Classes of Commercial Driver's License (TRC 522.041)

## Class A CDL

A motor vehicle having a gross combination weight rating or gross combination weight of 26,001 pounds or more, whichever is greater, inclusive of a towed unit(s) with a gross vehicle weight rating or gross weight of more than 10,000 pounds, whichever is greater.

- GVWR means the value specified by the manufacturer as the loaded weight of a single vehicle. FMCSR Part 383.5
- GCWR means a value specified by the manufacturer of the power unit, if such value is displayed on the Federal Motor Vehicle Standard (FMVSS) certification label required by the National Highway Transportation Safety Administration, or the sum of the gross vehicle weight (GVW) 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. GCWR means the value specified by the manufacturer as the loaded weight of a combination or articulated vehicle or, if the manufacturer has not specified a value, the sum of the gross vehicle weight rating of the power unit and the total weight of the towed unit or units and any load on a towed unit. FMCSR Part 383.5

## Class B CDL

Any single vehicle with a gross vehicle weight rating or gross vehicle weight of 26,001 pounds or more, a single vehicle with a gross vehicle weight rating or gross vehicle weight of 26,001 pounds or more towing a vehicle with a gross vehicle weight rating or gross vehicle weight of 10,000 pounds or less, and a vehicle designed to transport 24 passengers or more, including the driver.

## Class C CDL

Any single vehicle or combination of vehicles that is not a Class A or Class B if the vehicle is designed to transport 16 - 23 passengers, including the driver; or used in the transportation of hazardous materials that require placards under 49 CFR, Part 172.

## Endorsements (FMCSR Part 383.93)

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

- T Double/triple trailers (knowledge test)
- P Passenger (knowledge and skills tests)
- N Tank vehicle (knowledge test)
- H Hazardous materials (knowledge test)
- X Combination of tank vehicle and hazardous materials (knowledge tests)
- S School bus (knowledge and skills test)

## Age Requirements

- Interstate: Minimum age for a CDL is 21 (391.11(b)(1))
- Intrastate: Minimum age for a CDL is 18 (TRC 522.027)

## Persons Exempted from Texas CDL Requirements (TRC 522.004 & FMCSR Part 383)

- > Farmer/Rancher or his employee operating a vehicle that would be classified as a CMV and is:
  - Controlled and operated by a farmer or his employee;
  - Used to transport agricultural products, farm machinery or farm supplies to and from a farm
  - Notused in the operation of a contractor common carrier; and
  - Used within 150 air miles of the person's farm or ranch.
- Persons operating firefighting or emergency vehicles necessary for the preservation of life and property.
- > Military personnel operating military vehicles.
- > Persons operating recreational vehicles for personal use.
- A person operating a vehicle owned, leased or controlled by an air carrier and that is operated exclusively at the premises of an airport.
- > A vehicle used exclusively to transport seed cotton modules or cotton burrs.
- > A Covered Farm Vehicle as defined in FMCSR 390.5

## Texas CDL Restrictions

- L Vehicles without air brakes. This restriction applies only to vehicles requiring a commercial driver license (CDL). The licensee is restricted to operating a commercial motor vehicle (CMV) which does not have air brakes.
- **K** CDL intrastate commerce only. The licensee is restricted to operating a CMV in intrastate commerce and may not drive in interstate commerce.
- P Personal Restrictions. The licensee is restricted to operating a motor vehicle as per the restriction stated on the driver license.
- Y Valid Texas vision or limb waiver required.
- Z No full air brake equipped CMV

## **Texas Vision and Limb Waivers**

The Department may provide a waiver for a person who is otherwise disqualified under Title 49, Code of Federal Regulations, Part 391.41(b)(1), (b)(2) or (b)(10), FOR INTRASTATE DRIVING ONLY, provided that the intrastate driver meets the vision or limb waiver standards as set by this Department. For further information, you may call the Department's DLD - Enforcement Compliance Section, at 512-424-2600.

The Department MAY NOT provide a waiver under Title 49, Code of Federal Regulations, Part 391.41(b)(1), (b)(2) or (b)(10) for an interstate driver.

## Air Brake Restrictions (TRC 522.043(a)(1))

If an applicant fails the air brake section of the knowledge test, or performs the skills test in a vehicle not equipped with air brakes, his/her CDL, if issued, will indicate that the license holder may not operate any CMV equipped with air brakes.

## Notification to Employer and Licensing State (Part 383.31 and TRC 522.061)

Upon conviction for any State or local traffic violation, a driver must notify his/her employer(s) within 30 days. This notification must be in writing and must include the following information:

- > Driver's full name
- Driver's license number
- Date of conviction
- Details about the offense, including any resulting suspension, revocation, or cancellation of driving privileges
- Indication of whether the violation happened in a CMV
- Location of offense, and
- Driver's signature.

## **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.
- > Two serious traffic violations occurring within a three-year period.
- > Violations of law that regulates the operation of a motor vehicle at a railroad grade crossing
- > Driving a CMV while the person's alcohol concentration was 0.04% or more.
- Refusing to submit to a test to determine the person's alcohol concentration or the presence in the person's body of a controlled substance.
- > Causing the death of another person through the negligent or criminal operation of a CMV.
- Driving a CMV while the person's CDL is revoked, suspended, canceled or disqualified, for an action or conduct that occurred while operating a CMV.

| If a driver oper-<br>ates a motor<br>vehicle and is<br>convicted of:   | For a first convic-<br>tion or refusal to<br>be tested while<br>operating a CMV,<br>a person required<br>to have a CDL<br>and a CDL holder<br>must be disquali-<br>fied from operat-<br>ing a CMV for | For a first convic-<br>tion or refusal to<br>be tested while<br>operating a non-<br>CMV, a CDL<br>holder must be<br>disqualified from<br>operating a CMV<br>for | For a first convic-<br>tion or refusal to<br>be tested while<br>operating a CMV<br>transporting haz-<br>ardous materials<br>required to be<br>placarded under<br>the Hazardous<br>Materials Regula-<br>tions (49 CFR<br>part 172, subpart<br>F), a person re-<br>quired to have a<br>CDL and CDL<br>holder must be<br>disqualified from<br>operating a CMV<br>for | For a second con-<br>viction or refusal<br>to be tested in a<br>separate incident<br>of any combina-<br>tion of offenses in<br>this Table while<br>operating a CMV,<br>a person required<br>to have a CDL<br>and a CDL holder<br>must be disquali-<br>fied from operat-<br>ing a CMV for | For a second con-<br>viction or refusal<br>to be tested in a<br>separate incident<br>of any combina-<br>tion of offenses in<br>this Table while<br>operating a non-<br>CMV, a CDL<br>holder must be<br>disqualified from<br>operating a CMV<br>for |
|--|---|---|---|--|--|
| (1) Being under<br>the influence of<br>alcohol as pre-<br>scribed by State<br>law.   | 1 year.   | 1 year.   | 3 years.  | Life.  | Life.  |
| (2) Being under<br>the influence of a<br>controlled<br>substance.  | 1 year.   | 1 year.   | 3 years.  | Life.  | Life.  |
| (3) Having an al-<br>cohol concentra-<br>tion of 0.04 or<br>greater while op-<br>erating a CMV.  | 1 year.   | Not applicable.   | 3 years.  | Life.  | Not applicable.  |
| (4) Refusing to<br>take an alcohol<br>test as required<br>by a State or<br>jurisdiction under<br>its implied con-<br>sent laws or<br>regulations as de-<br>fined in §383.72<br>of this part. | 1 year.   | 1 year.   | 3 years.  | Life.  | Life.  |
| (5) Leaving the scene of an accident.  | 1 year.   | 1 year.   | 3 years.  | Life.  | Life.  |
| (6) Using the ve-<br>hicle to commit a<br>felony, other than<br>a felony de-<br>scribed in<br>paragraph (b)(9)<br>of this table.   | 1 year.   | 1 year.   | 3 years.  | Life.  | Life.  |

| If a driver operates<br>a motor vehicle<br>and is convicted of:  | For a first convic-<br>tion or refusal to<br>be tested while<br>operating a CMV,<br>a person required<br>to have a CDL<br>and a CDL holder<br>must be disquali-<br>fied from operat-<br>ing a CMV for | For a first convic-<br>tion or refusal to<br>be tested while<br>operating a non-<br>CMV, a CDL<br>holder must be<br>disqualified from<br>operating a CMV<br>for | For a first convic-<br>tion or refusal to<br>be tested while<br>operating a CMV<br>transporting haz-<br>ardous materials<br>required to be<br>placarded under<br>the Hazardous<br>Materials Regula-<br>tions (49 CFR<br>part 172, subpart<br>F), a person re-<br>quired to have a<br>CDL and CDL<br>holder must be<br>disqualified from<br>operating a CMV<br>for | For a second con-<br>viction or refusal<br>to be tested in a<br>separate incident<br>of any combina-<br>tion of offenses in<br>this Table while<br>operating a CMV,<br>a person required<br>to have a CDL<br>and a CDL holder<br>must be disquali-<br>fied from operat-<br>ing a CMV for | For a second con-<br>viction or refusal<br>to be tested in a<br>separate incident<br>of any combina-<br>tion of offenses in<br>this Table while<br>operating a non-<br>CMV, a CDL<br>holder must be<br>disqualified from<br>operating a CMV<br>for |
|--|---|---|---|--|--|
| (7) Driving a CMV<br>when, as a result<br>of prior violations<br>committed operat-<br>ing a CMV, the<br>driver's CDL is re-<br>voked, sus-<br>pended, or<br>canceled, or the<br>driver is disquali-<br>fied from operat-<br>ing a CMV. | 1 year.   | Not applicable.   | 3 years.  | Life.  | Not applicable.  |
| (8) Causing a fa-<br>tality through the<br>negligent opera-<br>tion of a CMV, in-<br>cluding but not<br>limited to the<br>crimes of motor<br>vehicle<br>manslaughter,<br>homicide by<br>motor vehicle and<br>negligent homi-<br>cide.  | 1 year.   | Not applicable.   | 3 years.  | Life.  | Not applicable.  |
| (9) Using the ve-<br>hicle in the com-<br>mission of a<br>felony involving<br>manufacturing,<br>distributing, or<br>dispensing a con-<br>trolled substance.  | Life-not eligible<br>for 10-year<br>reinstatement.  | Life-not eligible<br>for 10-year<br>reinstatement.  | Life-not eligible<br>for 10-year<br>reinstatement.  | Life-not eligible<br>for 10-year<br>reinstatement.   | Life-not eligible<br>for 10-year<br>reinstatement.   |

## **Commercial Driver License Medical Certification Requirement (37 TAC 16.23)**

Beginning March 5, 2012, all commercial drivers are required to complete a self-certification affidavit.

When applying for or renewing a Texas commercial driver license. If you are required to maintain a USDOT medical examiner's certificate, you must also present a copy of the certificate. If you have a medical variance, you must submit that as well.

When filling out the self-certification affidavit you must select the type of commerce in which you operate.

- Interstate non-excepted: You are an interstate non-excepted driver and must meet the Federal DOT medical card requirements. (CDL-4)
- Interstate excepted: You are an interstate excepted driver and do not have to meet the Federal DOT medical card requirements. (CDL-10)
- Intrastate non-excepted: You are an intrastate non-excepted driver and are required to meet the DOT medical requirements. (CDL-5 part B)
- Intrastate excepted: You are an intrastate excepted driver and do not have to meet the DOT medical requirements. (CDL-5 part A)

Failure to keep a current DOT medical examiners certificate (and variance, if applicable) on file with DPS will result in the downgrade of your commercial driver license. Any time you are issued a new medical examiners certificate you are required to send the new certificate and the affidavit, to the Department within 15 days of the DOT medical certificate issuance date.

## **Form Submission**

Current CDL affidavits can be downloaded from the agency website at <a href="https://www.dps.texas.gov/DriverLicense/medCertReq.htm">https://www.dps.texas.gov/DriverLicense/medCertReq.htm</a>

If you do not currently need to visit a driver license office to apply for or renew you CDL, you may submit your self-certification affidavit and if applicable, DOT medical examiner's certificate and medical variance, one of the following ways:

By email to: <u>CDLMedCert@dps.texas.gov</u> (must be in PDF form)

- By fax to: (512) 424-2002 Texas Department of Public Safety Enforcement and Compliance Service Attention: CDL Section
- By mail to: Texas Department of Public Safety Enforcement and Compliance Service Attention: CDL Section PO Box 4087 Austin, TX 78773

## NOTES



## Part 385 - Safety Fitness Standards

## (also TEX. TRANSP. CODE § 644.155 and Texas Administrative Code Title 37, Part 1, Chapter 4, Subchapter B, Rule § 4.15)

Based on the type of investigation a motor carrier may receive a safety rating when a Safety Investigator conducts an on-site review of the carrier's compliance with the Federal Motor Carrier Safety Regulations (FMCSRs) and the Hazardous Materials Regulations (HMR). The Safety Investigator reviews records, and evaluates roadside vehicle inspection data and accidents to determine whether a motor carrier meets Section 385.5 Safety Fitness standard.

## Safety Fitness Determinations (385.3)

- Satisfactory: A motor carrier has in place and functioning adequate safety management controls to meet the safety fitness standard prescribed in Section 385.5. Safety management controls are adequate if they are appropriate for the size and type of operation of the particular motor carrier.
- Conditional: A motor carrier does not have adequate safety management controls in place to ensure compliance with the safety fitness standard that could result in the occurrences listed in Section 385.5(a) through (k).
- Unsatisfactory: A motor carrier does not have adequate safety management controls in place to ensure compliance with the safety fitness standards which has resulted in occurrences listed in Section 385.5(a) through (k). Motor carriers receiving an "unsatisfactory safety rating" may be subject to the provisions of Section 385.13.

## Interstate Timelines (385.11)

An **interstate** motor carrier will receive written notice of the safety rating from the Federal Motor Carrier Safety Administration (FMCSA). A motor carrier transporting placardable quantities of hazardous materials, or operating a CMV transporting passengers that has received an "unsatisfactory" safety rating from the FMCSA will have 45 calendar days from the notice of proposed rating to improve the safety rating to "conditional" or "satisfactory." Other motor carriers that have received an "unsatisfactory." If this improvement does not occur, the carrier is prohibited from operating commercial motor vehicles. Also, a motor carrier with an "unsatisfactory" safety rating is ineligible to contract or subcontract transportation services with Federal agencies.

## Intrastate Timelines (37 TAC 4.15(a)(4)(D))

The Texas Department of Public Safety will assign a safety rating to an <u>intrastate</u> motor carrier. A motor carrier transporting placardable quantities of hazardous materials, or operating a CMV transporting passengers that has received an "unsatisfactory" safety rating from the Department will have 45 calendar days from the notice of proposed rating to improve the safety rating to "conditional" or "satisfactory." Other motor carriers that have received an "unsatisfactory." If this improvement does not occur, the carrier is prohibited from operating commercial motor vehicles.

## Compliance Review (385.3)

A compliance review is an on-site examination of the motor carrier's records and operations to determine whether the carrier meets the safety fitness standard. The review may include an examination of the following aspects of the motor carrier's operations:

- Driver's hours of service
- Vehicle inspection and maintenance
- Driver qualification
- CDL Requirements
- Financial responsibility
- > Accidents
- Hazardous materials
- > Driver training
- Alcohol and controlled substance testing
- > Other safety and transportation records
- Roadside vehicle out-of-service rate

A compliance review is conducted to investigate potential safety violations, to investigate complaints, or is in response to a carrier's request for a change in safety rating. The results of the compliance review may result in the initiation of an enforcement action.

## Safety Fitness Standard (385.5)

The satisfactory safety rating is based on the degree of compliance with the safety fitness standard for motor carriers. To meet the safety fitness standard, the motor carrier shall demonstrate that it has adequate safety management controls in place that function effectively to ensure acceptable compliance with applicable safety requirements to reduce the risk associated with:

- > Commercial driver's license standard violations (Part 383)
- Inadequate levels of financial responsibility (Part 387)
- > The use of unqualified drivers (Part 391)
- > Improper use and driving of motor vehicles (Part 392)
- > Unsafe vehicles operating on the highways (Part 393)
- Failure to maintain accident registers and copies of accident reports (Texas does not require motor carriers to maintain accident reports) (Part 390)
- > The use of fatigued drivers (Part 395)
- > Inadequate inspection, repair, and maintenance of vehicles (Part 396)
- > Transportation of hazardous materials, driving and parking rule violations (Part 397)
- Violation of hazardous materials regulations (Parts 170 through 177)
- > Motor Vehicle Accidents and Hazardous materials incidents (Part 390 & 171)
- > Driver training requirements (Part 380)
- > Alcohol and controlled substance testing violations (Part 382)

## Final Unsatisfactory Safety Ratings/Order to Cease Transportation (385.13)

A motor carrier issued a Final Unsatisfactory Safety Rating by the FMCSA or the Department will be prohibited from transporting passengers or property under the jurisdiction of that agency. Operations in violation of the Order to Cease Transportation may result in civil or administrative penalties.

## Request for a Departmental Review of a Safety Rating; Facts and Procedure (385.15)

A petition for review of a safety rating, where there are factual or procedural disputes, must list all issues in dispute and be accompanied by any information or documents the motor carrier is relying upon as the basis for its petition. The request must be sent to the agency which issued the Safety Rating.

## Request for a Change in a Safety Rating; Corrective Action Taken (385.17)

Motor carrier's may request a change in a safety rating when the basis for the change is evidence that corrective actions have been taken, and that operations currently meet the safety fitness standard specified in Sections 385.5 and 385.7. The request must be sent to FMCSA if the motor carrier is registered as an interstate carrier. For "intrastate only" motor carriers, the request must be sent to the Texas Department of Public Safety Motor Carrier Bureau.

## New Entrant Background Information (Part 385, Subpart D, Sections 385.301 to 385.337)

## What are the requirements of this rule?

The FMCSA announced that as of January 1, 2003, new entrant **interstate** motor carriers domiciled in the U.S. or Canada must complete an application package consisting of the Motor Carrier Identification Report (MCS-150) and Safety Certification Application for USDOT Number (MCS-150A). Motor carriers may complete this application on-line at <u>https://www.fmcsa.dot.gov/registration/registration-forms</u>. Once completed, the carrier will be granted new entrant registration (USDOT number).

After being issued a new entrant registration, the motor carrier will be subject to an 18-month safetymonitoring period. During this safety-monitoring period, the motor carrier will receive a safety audit and have their roadside crash and inspection information closely evaluated. The motor carrier will be required to demonstrate it has the necessary systems in place to ensure basic safety management controls. Failure to demonstrate basic safety management controls may result in the motor carrier having their new entrant registration revoked.

## Who is subject to this rule?

All new motor carriers (private and for-hire) operating in <u>interstate</u> commerce must apply for registration (US DOT Number). Exception: Non Business Private Motor Carriers of Passengers are not subject to the requirement of Part 385.

**Intrastate** motor carriers are not subject to this program, but must still apply for motor carrier registration with the Texas Department of Motor Vehicles (TXDMV) and receive their motor carrier registration number. An intrastate motor carrier will be subject to the New Entrant Program when and if it begins operating interstate, even if it has been in operation for several years.

## What happens after the 18-month new entrant registration?

The carrier will be notified in writing that the "new entrant" designation will be removed from their registration at the end of the 18-month safety-monitoring period, if the carrier meets the following requirements:

- A safety audit was performed within the 18 month period and the carrier is not currently subject to an out-of-service order or under a notice to take action to remedy safety management controls; or
- > Has not been deemed "unfit" following a compliance review

If a safety audit or compliance review has not been performed within the 18 month monitoring period through no fault of the motor carrier, the carrier will stay under the new entrant designation until a safety audit or compliance review can be performed. Based on the results of the safety audit or compliance review, FMCSA will either:

- Remove the new entrant designation and notify the new entrant in writing that its registration has become permanent; or
- > Revoke the new entrant registration in accordance with 385.319(c).

## Where will these safety audits be conducted?

An on-site safety audit is conducted by an FMCSA-certified investigator at a Department of Public Safety building, or the carrier's place of business. An off-site Safety audit is conducted electronically, by submitting relevant documents to the investigator electronically by computer or by fax. FMCSA/DPS will notify the carrier of the type of safety audit they have been selected for by phone, mail or by electronic correspondence.

## When did this rule go into effect?

The rule became effective January 1, 2003.

## When will safety audits be conducted?

New entrant motor carriers can expect to start receiving safety audits 3-6 months after they are granted new entrant registration.

## How will the safety audit be conducted?

A State or Federal Auditor will conduct the audit which will consist of a review of the carrier's safety management system including, but are not limited to, the following:

- Driver Qualification;
- Driver Duty Status;
- Vehicle Maintenance;
- Accident Register; and
- > Controlled Substances and Alcohol use and testing requirements.

FMCSA will notify the "interstate carrier" in **writing** of the results of the safety audit within **<u>45 days</u>** from the date it was completed.

## **CSA** Initiative

Beginning in late 2010 FMCSA and DPS began evaluating the safety fitness of carriers using a new methodology in the safety measurement system (SMS). None of the requirements change under CSA, but the existing requirements will all be classified into the following broad categories:

- Unsafe Driving
- Hours-of-Service Compliance
- Driver Fitness
- Controlled Substances/Alcohol
- > Vehicle Maintenance, (to include cargo securement, December 2012)
- Hazardous Materials
- Crash Indicator

Less than satisfactory evaluations in one or more categories can result in comprehensive compliance reviews or a range of less intrusive alternative interventions. This may also result in future changes to the safety rating process. But again, it DOES NOT CHANGE federal safety regulation requirements – only the way your compliance history is reviewed.

Additional information can be found at http://ai.fmcsa.dot.gov/sms and http://csa.fmcsa.dot.gov.

## NOTES



## Part 387 - Financial Responsibility for Motor Carriers

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.

## **Requirement for Financial Responsibility**

Motor carriers operating CMVs in interstate, foreign, or intrastate commerce, must have at least the minimum amount of insurance required by law.

- > For Interstate Property Carriers, see 387.7 & 387.9
- > For Interstate Passenger Carriers, see 387.31 & 387.33
- > For Intrastate Carriers, see Texas Administrative Code 218.16(a)

## **Proof of Insurance**

The motor carrier must have proof of the minimum level of insurance at the company's principal place of business shown by any of the following:

- 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.
- Endorsements for Motor Carriers of Passengers policies of insurance for public liability under Section 18 of the Bus Regulatory Reform Act of 1982 (Form MCS-90B) issued by an insurer.
- A Motor Carrier Surety Bond for public liability under Section 30 of the Motor Carrier Act of 1980 (Form MCS-82) issued by a surety.
- A Motor Carrier of Passengers Surety Bond for public liability under Section 18 of the Bus Regulatory Reform Act of 1982 (Form MCS-82B) issued by a surety.
- A written decision, order, or authorization of the Interstate Commerce Commission authorizing the motor carrier to self-insure under 49 CFR 1043.5.

These insurance forms can be obtained from (or in many cases filed online by) your insurance company, but are also available at: <u>https://www.fmcsa.dot.gov/registration/registration-forms</u>.

The driver of a commercial motor vehicle must have proof of insurance (usually a Cab Card) in the commercial motor vehicle whenever operating the vehicle, and must show it to any law enforcement personnel who asks to see it.

A motor carrier required to register with FMCSA must also provide proof of insurance (if required) using the appropriate MCS-150 form. A motor carrier required to register with TXDMV must ensure the insurance carrier provides proof of insurance to TXDMV through the MCCS online system. A motor carrier who elects to re-register through FMCSA and UCR rather than through TXDMV must file according to FMCSA guidelines. For more information on registration and operating authority, see Part 392 of this manual.

## 43 TAC §218.16(a)

| Type of Vehicle   | Minimum Insurance Level |
|---|-------------------------|
| 1. Vehicles transporting household goods (gross vehicle weight,                             | \$300,000               |
| registered weight, or gross weight rating of 26,000 lbs. or less).                          |                         |
| 2. Buses designed or used to transport more than 15 people, but                             | \$500,000               |
| fewer than 27 people.   |                         |
| 3. Buses designed or used to transport 27 or more people.                                   | \$5,000,000             |
| 4. Commercial school buses, regardless of the passenger                                     | \$500,000               |
| capacity as described in Transportation Code, §643.1015.                                    |                         |
| 5. Farm trucks (gross vehicle weight, registered weight, or gross                           | \$500,000               |
| weight rating of 48,000 lbs. or more).  |                         |
| 6. Commercial motor vehicles and vehicles transporting                                      | \$500,000               |
| household goods (gross vehicle weight, registered weight, or                                |                         |
| gross weight rating in excess of 26,000 lbs.).  |                         |
| 7. Commercial motor vehicles - Oil listed in 49 C.F.R. §172.101;                            | \$1,000,000             |
| hazardous waste, hazardous materials and hazardous  |                         |
| substances defined in 49 C.F.R.§171.8 and listed in 49 C.F.R.                               |                         |
| §172.101, but not mentioned in items 8 or 9 of this table.                                  |                         |
| 8. Commercial motor vehicles with a gross vehicle weight rating                             | \$5,000,000             |
| of 10,001 or more pounds - Hazardous substances, as defined in                              |                         |
| 49 C.F.R. §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 material, 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                         |                         |
| C.F.R. §173.403.  | <b>*</b> 5,000,000      |
| 9. Commercial motor vehicles with a gross vehicle weight rating                             | \$5,000,000             |
| of less than 10,001 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 C.F.R. §173.403. |                         |
|   |                         |

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 or province)              |
| Dated aton thisday of,  |  |
| Amending Policy Number:Effective Date   | 2:   |
| Name of Insurance Company:  |  |
| <b>Countersigned by:</b>  | company representative)                        |
| The policy to which this endorsement is attached provides the limits shown (check only one):  |  |
| $\bigcirc$ This insurance is primary and the company shall not be liable for amounts in excess o  | f\$for each accident.                          |
| O This insurance is excess and the company shall not be liable for amounts in excess of \$ underlying limit of \$for each accident.   | for each accident in excess of the             |
| Whenever required by the Federal Motor Carrier Safety Administration (<br>duplicate of said policy and all its endorsements. The company also a<br>representative of the FMCSA, to verify that the policy is in force as of | grees, upon telephone request by an authorized |

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 <u>49 U.S.C. 13901</u>, 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).

| Filings must be transmitted online via the Internet at http://www.fmcsa.dot.gov/urs. |
|--|
|--|

## **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.

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,

**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, fi shellfish and wildlife.

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

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.

(continued on next page)

## 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 <u>49 CFR 171.8</u> ,<br>transported in cargo tanks, portable tanks, or hopper-<br>type vehicles with capacities in excess of 3,500 water<br>gallons; or in bulk Division 1.1, 1.2, and 1.3 materials,<br>Division 2.3, Hazard Zone A, or Division 6.1, Packing<br>Group I, Hazard Zone A material; in bulk Division 2.1 or<br>2.2; or highway route controlled quantities of a Class 7<br>material, as defined in <u>49 CFR 173.403</u> . | \$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 <u>49 CFR 172.101</u> ; hazardous waste,<br>hazardous materials, and hazardous substances<br>defined in <u>49 CFR 171.8</u> and listed in <u>49 CFR 172.101</u> ,<br>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 <u>49 CFR 173.403</u> .  | \$5,000,000     |

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

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 Section 18 of the Bus Regulatory Reform Act of 1982

## FORM MCS-90B

| Issued to(Motor Carrier name)  | of(Motor Carrier state)  |
|--|--|
| Dated aton thisday of_   | ,  |
| Amending Policy Number:  | Effective Date:  |
| Name of Insurance Company:   |  |
| Counter  | rsigned by:  |
| The policy to which this endorsement is attached provi   | des primary or excess insurance, as indicated for the limits shown (check only one): |
| $\bigcirc$ This insurance is primary and the company shall not be li                           | able for amounts in excess of \$for each accident.                                   |
| O This insurance is excess and the company shall not be liab<br>underlying limit of \$for each | le for amounts in excess of \$for each accident in excess of the 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.

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

*Motor Vehicle* means a for-hire carrier of passengers by motor vehicle.

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

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

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 for-hire motor carrier of passengers with Section 18 of the Bus Regulatory Reform Act of 1982 and the rules and regulations of the Federal Motor Carrier Safety Administration.

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 received 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 18 of the Bus Regulatory Reform Act of 1982 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 again 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 any one 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

For-hire motor carriers of passengers

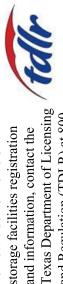
operating in interstate or foreign commerce

The Bus Regulatory Reform Act 1982 requires limits of financial responsibility according to vehicle seating capacity, it is the **Motor Carrier's** obligation to obtain the required limits of financial responsibility. **The schedule of limits shown on the reverse side does not provide coverage.** The limits shown in the schedule are for information purposes only.

| Vehicle Seating Capacity   | <b>Minimum Limits</b> |
|--|-----------------------|
| (1) Any vehicle with a seating capacity of 16 passengers or me   | ore \$5,000,000       |
| (2) Any vehicle with a seating capacity of 15 passengers or less | ss \$1,500,000        |

## TOW TRUCK & VEHICLE STORAGE FACILITY REGISTRATION

storage facilities registration For tow truck or vehicle



and information, contact the

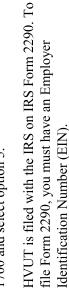
section).

CStowing@tdlr.texas.gov; or visit the TDLR 803-9202 or 512-463-6599; by email: and Regulation (TDLR) at 800website at: www.tdlr.texas.gov.

## PROOF OF HEAVY VEHICLE USE TAX (HVUT) PAYMENT

specifics regarding this requirement, call 800-299with a gross weight or combined gross Service (IRS) when licensing vehicles weight of 55,000 pounds or more. For **TxDMV** requires proof of HVUT payment to the Internal Revenue 1700 and select option 5.

IRS



Questions regarding HVUT Form 2290 or to obtain an EIN, tax forms and instructions, contact the IRS at 866-699-4096 or visit www.IRS.gov.

## STATE FUEL USE TAX (IFTA)

International Fuel Tax Agreement (IFTA) license that provides for the consolidated reporting of fuel required to pay state fuel use tax and have the option to obtain an All interstate motor carriers are axes. For details, contact:

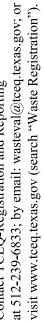
OFFICEO

**Fexas Comptroller of Public Accounts** Website: www.comptroller.texas.gov Toll-free: 800-252-1383 11 East 17th Street Austin, TX 78774

## HAZARDOUS MATERIALS TRANSPORT AND HAZARDOUS WASTE PERMITS

Motor carriers hauling hazardous materials must obtain MOTOR CARRIER REGISTRATION operating authority from TxDMV (see

Contact TCEQ-Registration and Reporting The Texas Commission on Environmental transportation of certain hazardous waste. Quality (TCEQ) requires registration for



467-4922 or visit their website at: http://phmsa.dot.gov/ certain hazardous materials. For information call 800-Administration requires registration for transporting The federal Pipeline and Hazardous Materials Safety hazmat/registration.

the Federal Motor Carrier Safety Administration website TxDOT's website at www.TxDOT.gov (search 'NRHM To obtain information on hazardous cargo routing, visit at: www.fmcsa.dot.gov (search "HM Route") or Route").

For general (non-routing) questions regarding hazardous materials, contact DPS Commercial Vehicle Enforcement Service at 512-424-2051.



4000 Jackson Ave. • Austin, Texas 78731 **TxDMV** • Motor Carrier Division www.TxDMV.gov



A Guide for Operating **Commercial Trucks** in Texas



**TxDMV** Motor Carrier Division Prepared by the

## **MOTOR CARRIER RESPONSIBILITIES**

of agencies are involved in the motor carrier program Motor carriers operating in Texas must comply with federal and state operating requirements. A number and regulations.

The Texas Department of Motor Vehicles (TxDMV) provides information about requirements from other governmental agencies as a courtesy. Carriers may need permits or other authorization from other governmental agencies not listed in this guide.

## **MOTOR CARRIER SAFETY**

follow specific safety regulations. Motor carriers are required to

Highway Safety is available on the Texas Department of Public Safety A Texas Motor Carrier's Guide to (DPS) website at:

S

-9"). DPS is responsible for safety enforcement in www.dps.texas.gov (search "MCS Texas. For federal safety information and enforcement, visit the Federal Motor Carrier Safety Administration website at www.fmcsa.dot.gov.

## **COMMERCIAL DRIVERS LICENSE**

Service, at 512-424-2000 or visit the DPS website at: Most commercial vehicle operators are required to contact DPS, Commercial Vehicle Enforcement determine if a driver is required to have a CDL, have a Commercial Driver License (CDL). To www.dps.texas.gov.

Drivers Handbook, medical exam forms, or drug and For a copy of The Texas Commercial Motor Vehicle select DPS Forms in the "Top DPS Links" section. alcohol reporting forms, visit the DPS website and



# MOTOR CARRIER REGISTRATION

Operators of commercial motor vehicles that meet the following criteria, and those transporting household goods for-hire, must register their operations with TxDMV:

- A vehicle (or combination of vehicles) with a gross exceeding 26,000 pounds, that is designed or used weight, registered weight, or gross weight rating for transportation of cargo in furtherance of any commercial enterprise;
- someone who is not a U.S. citizen or does not live in A commercial motor vehicle owned or controlled by the U.S.

To register online or to obtain more information:

- Visit: www.TxDMV.gov and select "TxDMV Number" under the Motor Carriers heading.
- For assistance with the online process, call 800-299-1700 and select option 3.

information, visit www.TxDMV.gov and select "Unified international commerce are required to comply with the Unified Carrier Registration (UCR) Program. For UCR Carrier Registration" under the Motor Carriers heading. All motor carriers, brokers, freight forwarders and leasing companies who operate in interstate or

# VEHICLE REGISTRATION (LICENSE PLATES)

registering for intrastate movement (traveling only in All commercial vehicles must be registered. When [exas), visit your county tax office to obtain Combination license plates.

and apply for Apportioned registration. Apply online at www.TxDMV.gov (search "Apportioned") or visit one participate in the International Registration Plan (IRP) Interstate operators (traveling across state lines) may of the 16 regional offices of the TxDMV.

Vehicles not authorized to operate on Texas highways may be issued 72-hour or 144-hour temporary permit. due to lack of registration or registration reciprocity,

Registration" under the Motorists heading and then Contact your county tax assessor collector or visit www.TxDMV.gov and click on "Vehicle "Temporary Permits".

regional office location information, contact TxDMV For additional vehicle registration information or at 888-368-4689 or visit www.TxDMV.gov.

# **OVERSIZE/OVERWEIGHT LOAD PERMITS**

Operators of vehicles and/or loads that exceed Texas legal size and weight limits must obtain an oversize and/or overweight permit from the TxDMV.

- Legal Width 8 feet, 6 inches
  - Legal Height 14 feet
- Truck and trailer combination Legal Length - Varies based on vehicles and combinations
  - Truck-tractor unlimited 65 feet
- Truck-tractor combination
- unlimited but trailer is limited to overall length
  - 59 feet 0
- (double trailer) 28 1/2 feet Semi-trailer (single unit) - 59 feet
  - Legal Axle/Axle Group Limits: single axle -Legal Gross Weight - 80,000 pounds
- 20,000 pounds, tandem 34,000 pounds, triple -42,000 pounds, etc.

(select the "Motor Carriers" heading) or call TxDMV For detailed information on legal length and weight requirements, or forms, visit www.TxDMV.gov limits, additional information on permit at 800-299-1700 and select option 2.



issued through the online permit Select permit types may be self-Routing Optimization System system, Texas Permitting and

(TxPROS). Sign up to order and self-issue oversize/ overweight permits through TxPROS, visit http:// TxPROS.TxDMV.gov.

## NOTES



## Part 390 - Federal Motor Carrier Safety Regulations (General Rules applicable to All Motor Carriers)

The FMCSRs apply to all employers, employees, and CMVs transporting property or passengers in interstate/intrastate commerce.

## **Relief From Regulations During Emergencies (390.23)**

Relief from Parts 390-399 of the FMCSRs may be granted during declared emergencies to any motor carrier who provides emergency assistance. Relief from certain FMCSRs may be declared by a Federal or State government official having authority to declare an emergency. PLEASE READ EMERGENCY DECLARATIONS CLOSELY, because normally they provide relief from some but not all regulations.

**Interstate CMV (390.5):** Any self-propelled or towed motor vehicle used on a highway in interstate commerce to transport passengers or property when the vehicle:

- Has a GVWR or GCWR, 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.

## Intrastate CMV (TRC 548.001): Texas regulations shall be applicable to:

- Vehicles with an actual gross weight or a gross weight rating in excess of 26,000 pounds except that the regulations will be applicable to farm vehicles with an actual gross weight, or a gross weight rating of 48,000 pounds or more;
- Vehicles transporting hazardous material requiring placards;
- > Vehicles transporting 15 or more passengers, including the driver

## In intrastate commerce such regulations shall not apply to 37 TAC 4.12(a)(1):

- A vehicle used in oil or water well servicing or drilling 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 purposes.
- A mobile crane which is an unladen, self-propelled vehicle constructed as a machine used to raise, shift or lower weights.
- > A vehicle transporting a seed cotton module; or
- Concrete pumps.

## **Exceptions to General Applicability (390.3)**

Unless otherwise specifically provided, the FMCSRs do not apply to:

- > All school bus operations as defined in Section 390.5
- Transportation performed by the Federal government, a State, or any political subdivision of a State, or agency established under a compact between States that has been approved by the Congress of the United States;
- The occasional transportation of personal property by individuals not for compensation nor in the furtherance of a commercial enterprise;

## A Texas Motor Carrier's Guide to Highway Safety

- > The transportation of human corpses or sick and injured persons;
- The operation of a fire truck and rescue vehicles while involved in emergency and related operations
- > Delivery of propane heating fuel or pipeline repair responding to a weather emergency.
- There are specific rules about certain vehicles designed to transport 9-15 passengers (including the driver). Please refer to 390.3(f)(6) for details.

## Accident Register (390.15(b))

**Accident:** An occurrence involving a CMV operating on a public road which 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

An occurrence involving only loading or alighting from a stationary vehicle, or only the loading or unloading of cargo is not included in the term "accident." (390.15)

For a period of **three** years after an accident occurs (for accidents prior to April 29, 2003, this was only required for one year), motor carriers shall maintain an accident register containing at least 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 (Texas does not require motor carriers to maintain accident reports) or other governmental entities or insurers for a period of **three years** after an accident occurs.

## Commercial Vehicle Markings - (390.21)

Every commercial vehicle operated in interstate or intrastate commerce must be marked on both sides of the vehicle with the following information:

- > Motor Carrier's legal name or trade name
- > Motor Carrier's identification number, preceded by "US DOT"
- INTRASTATE ONLY If the carrier has not been issued a USDOT number, due to comparable safety program (RRC, TDLR, TABC, etc.) vehicle need only display name.
- > The MC/MX number, TXDMV number and other state ID numbers are now optional in Texas.

## International Fuel Tax Agreement (IFTA)

IFTA is a single fuel tax license issued by the base (home) state authorizing travel in all IFTA jurisdictions, which is designed to significantly reduce your compliance burdens for fuel tax reporting. If you are a Texas based carrier and operate one or more qualified motor vehicles in at least one or more member jurisdictions, (all 48 contiguous states of the United States) you may file an IFTA license application or you must purchase trip permits to travel through member jurisdictions (See 34 TAC 3.437).

For further information about IFTA, contact the Texas Comptroller of Public Accounts at 1-800-252-1383, or at <u>https://comptroller.texas.gov/taxes/fuels/ifta.php.</u>

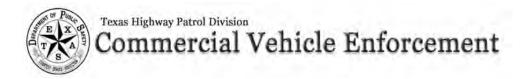
## IFTA Qualified Motor Vehicle (International Fuel Tax Agreement Article R245):

- Has two axles and a gross vehicle weight or registered gross weight exceeding 26,000 pounds; or
- > Has three or more axles regardless of weight; or
- Is used in combination when the weight of such combination exceeds 26,000 pounds gross vehicle weight.

For further information on IFTA, please contact the Texas Comptroller's Office at 1-800-252-1383 or <u>https://comptroller.texas.gov/taxes/fuels/ifta.php</u> or contact on the International Fuel Tax Association, Inc. at 480-839-4382 (Fax: 480-839-8821) or at <u>www.iftach.org</u>. A copy of the International Fuel Tax Agreement is available at the IFTA Inc. website.

|                   | HM<br>Incident          |  |  |  |  |  |  | t for  |
|-------------------|-------------------------|--|--|--|--|--|--|--|
|                   | Vehicles<br>Towed       |  |  |  |  |  |  | ny format  |
|                   | Number of<br>Fatalities |  |  |  |  |  |  | iay use ar   |
|                   | Number of<br>Injuries   |  |  |  |  |  |  | A motor carrier may use any format for   |
| ACCIDENT REGISTER | Driver Name             |  |  |  |  |  |  | g accidents.   |
| Ā                 | Location City/State     |  |  |  |  |  |  | Note: This form is provided as a suggested format for recording documenting recordable accidents which complies with 390.15. |
|                   | Date                    |  |  |  |  |  |  | This form i  |
|                   | Index<br>Number         |  |  |  |  |  |  | Note: 1<br>docume  |

## Sample Accident Register Form



## Part 391 - Qualification of Drivers

## **Relief From Regulations During Emergencies**

Relief from Parts 390-399 of the FMCSRs may be granted during declared emergencies to any motor carrier who provides emergency assistance under 390.23. However, motor carriers must still ensure that all drivers of CMVs meet the minimum qualifications specified in Part 391.

## Driver Requirements - Interstate (391.11)

- (a) A person shall not drive a commercial motor vehicle unless he/she is qualified to drive a commercial motor vehicle. Except as provided in §391.63, a motor carrier shall not require or permit a person to drive a commercial motor vehicle unless that person is qualified to drive a commercial motor vehicle.
- (b) Except as provided in Subpart G of this part, a person is qualified to drive a motor vehicle if he/she
  - (1) Is at least 21 years old;
  - (2) Can read and speak the English language sufficiently to converse with the general public, to understand highway traffic signs and signals in the English language, to respond to official inquiries, and to make entries on reports and records;
  - (3) Can, by reason of experience, training, or both, safely operate the type of commercial motor vehicle he/she drives;
  - (4) Is physically qualified to drive a commercial motor vehicle in accordance with Subpart E Physical Qualifications and Examinations of this part;
  - (5) Has a currently valid commercial motor vehicle operator's license issued only by one State or jurisdiction;
  - (6) Has prepared and furnished the motor carrier that employs him/her with the list of violations or the certificate as required by §391.27;
  - (7) Is not disqualified to drive a commercial motor vehicle under the rules in §391.15; and
  - (8) Has successfully completed a driver's road test and has been issued a certificate of driver's road test in accordance with §391.31, or has presented an operator's license or a certificate of road test which the motor carrier that employs him/her has accepted as equivalent to a road test in accordance with §391.33.

## Driver Requirements - Intrastate (37 TAC 4.12)

Drivers must meet the same requirements for interstate drivers except the driver must be at least 18 years of age, and may possess an intrastate-only medical waiver endorsement on a commercial driver's license. Drivers qualified intrastate but not interstate may obtain a Texas CDL with intrastate-only (K) restriction.

## General Requirements for Driver Qualification Files (391.51)

(a) Each motor carrier shall maintain a driver qualification file for each driver it employs. A driver's qualification file may be combined with his/her personnel file.

The qualification file for a driver must include:

- (1) The driver's application for employment completed in accordance with §391.21;
- (2) A copy of the motor vehicle record received from each State record pursuant to §391.23(a)(1);
- (3) The certificate of driver's road test issued to the driver pursuant to §391.31(e), or a copy of the license or certificate which the motor carrier accepted as equivalent to the driver's road test pursuant to §391.33;
- (4) The motor vehicle record received from each State driver licensing agency to the annual driver record inquiry required by §391.25(a);

- (5) A note relating to the annual review of the driver's driving record as required by §391.25(c)(2);
- (6) A list or certificate relating to violation of motor vehicle laws and ordinances required by §391.27;
- (7) (i)The medical examiner's certificate as required by §391.43(g) or a legible copy of the certificate;

(ii) Exception. For CDL holders, if the CDLIS motor vehicle record contains medical certification status information, the motor carrier employer must meet this requirement by obtaining the CDLIS motor vehicle record defined at §384.105 of this chapter. That record must be obtained from the current licensing State and placed in the driver qualification file. After January 30, 2015, a non-excepted, interstate CDL holder without medical certification status information on the CDLIS motor vehicle record is designated "not-certified" to operate a CMV in interstate commerce. After January 30, 2015, and through June 21, 2021, a motor carrier may use a copy of the driver's current medical examiner's certificate that was submitted to the State for up to 15 days from the date it was issued as proof of medical certification.

(iii) If that driver obtained the medical certification based on having obtained a medical variance from FMCSA, the motor carrier must also include a copy of the medical variance documentation in the driver qualification file in accordance with §391.51(b)(8);

(8) A Skill Performance Evaluation Certificate obtained from a Field Administrator, Division Administrator, or State Director issued in accordance with §391.49; or the Medical Exemption document, issued by a Federal medical program in accordance with part 381 of this chapter; and

(9) (i) For drivers not required to have a CDL, a note relating to verification of medical examiner listing on the National Registry of Certified Medical Examiners required by § 391.23(m)(1).

(ii) Until June 22, 2018, for drivers required to have a CDL, a note relating to verification of medical examiner listing on the National Registry of Certified Medical Examiners required by §391.23(m)(2).

## Investigation and Inquiries (391.23)

The FMCSA Drug and Alcohol Clearinghouse became effective on January 6, 2020. Employers of drivers subject to the licensing requirements of Part 383 and the drug and alcohol testing requirements in Part 382 are required to conduct both electronic queries in the Clearinghouse and traditional manual inquiries with previous employers to meet the requirements of 382.413 and 391.23(e). This will be required until January 6, 2023, at which point a query of the Clearinghouse will satisfy this requirement.

## **Driver Investigation History File (391.53)**

- (a) After October 29, 2004, each motor carrier must maintain records relating to the investigation into the safety performance history of a new or prospective driver pursuant to paragraphs (d) and (e) of §391.23. This file must be maintained in a secure location with controlled access.
  - (1) The motor carrier must ensure that access to this data is limited to those who are involved in the hiring decision or who control access to the data. In addition, the motor carrier's insurer may have access to the data, except the alcohol and controlled substances data.
  - (2) This data must only be used for the hiring decision.
- (b) The file must include:
  - (1) A copy of the driver's written authorization for the motor carrier to seek information about a driver's alcohol and controlled substances history as required under §391.23(d).
  - (2) A copy of the response(s) received for investigations required by paragraphs (d) and (e) of §391.23 from each previous employer, or documentation of good faith efforts to contact them. The record must include the previous employer's name and address, the date the previous employer was contacted, and the information received about the driver from the previous employer. Failures to contact a previous employer, or of them to provide the required safety performance history information, must be documented.

(c) The safety performance histories received from previous employers for a driver who is hired must be retained for as long as the driver is employed by that motor carrier and for three years thereafter.

(d) A motor carrier must make all records and information in this file available to an authorized representative or special agent of the Federal Motor Carrier Safety Administration, an authorized State or local enforcement agency representative, or an authorized third party, upon request or as part of any inquiry within the time period specified by the requesting representative.

## Physical Qualifications for Drivers (391.41)

(a)(1)(i) A person subject to this part must not operate a commercial motor vehicle unless he or she is medically certified as physically qualified to do so, and, except as provided in paragraph (a)(2) of this section, when on-duty has on his or her person the original, or a copy, of a current medical examiner's certificate that he or she is physically qualified to drive a commercial motor vehicle. NOTE: Effective December 29, 1991, the FMCSA Administrator determined that the new Licencia Federal de Conductor issued by the United Mexican States is recognized as proof of medical fitness to drive a CMV. The United States and Canada entered into a Reciprocity Agreement effective March 30, 1999, recognizing that a Canadian commercial driver's license is proof of medical fitness to drive a CMV. Therefore, Canadian and Mexican CMV drivers are not required to have in their possession a medical examiner's certificate if the driver has been issued, and possesses, a valid commercial driver license issued by the United Mexican States, or a Canadian Province or Territory and whose license and medical status, including any waiver or exemption, can be electronically verified. Drivers from any of the countries who have received a medical authorization that deviates from the mutually accepted compatible medical standards of the resident country are not qualified to drive a CMV in the other countries. For example, Canadian drivers who do not meet the medical fitness provisions of the Canadian National Safety Code for Motor Carriers, but are issued a waiver by one of the Canadian Provinces or Territories, are not qualified to drive a CMV in the United States. In addition, U.S. drivers who received a medical variance from FMCSA are not qualified to drive a CMV in Canada.

(ii) A person who qualifies for the medical examiner's certificate by virtue of having obtained a medical variance from FMCSA, in the form of an exemption letter or a skill performance evaluation certificate, must have on his or her person a copy of the variance documentation when on-duty.

## **Medical Exemptions**

There are exemptions to a disqualification for certain physical defects if the individual is otherwise qualified to drive. Contact FMCSA for information about waivers or Skills Performance Evaluations.

## **Texas Vision and Limb Waivers**

The Department may provide a waiver for a person who is otherwise disqualified under Title 49, Code of Federal Regulations, Part 391.41(b)(1), (b)(2) or (b)(10), FOR INTRASTATE DRIVING ONLY, provided that the intrastate driver meets the vision or limb waiver standards as set by this Department. For further information, you may call the Department's DLD - Enforcement Compliance Section, at (512) 424-2600.

The Department MAY NOT provide a waiver under Title 49, Code of Federal Regulations, Part 391.41(b)(1), (b)(2) or (b)(10) for an interstate driver.

- TEXAS MEDICAL EXAMINATIONS Texas drivers and drivers in intrastate commerce who are not transporting placardable amounts of hazardous material and were regularly employed in Texas as commercial vehicle drivers prior to August 28, 1989 are not required to meet the medical standards set out in the federal regulations.
- For the purpose of enforcement of this regulation, those drivers who reached their 18th birthday on or after August 28, 1989, shall be required to meet all medical standards.
- The exceptions contained in this paragraph shall not be deemed as an exemption from drug and alcohol testing requirements contained in Title 49, Code of Federal Regulations, Parts 40 and 382.

## Limited Record Keeping Exemptions (391.61 to 391.69)

The following specific conditions and types of drivers are exempt from specific record keeping requirements:

## Drivers Regularly Employed Before January 1, 1971 (391.61)

The provisions of §391.21 (relating to applications for employment), §391.23 (relating to investigations and inquiries), and §391.33 (relating to road tests) do not apply to a driver who has been a single-employer driver (as defined in §390.5 of this subchapter) of a motor carrier for a continuous period which began before January 1, 1971, as long as he/she continues to be a single-employer driver of that motor carrier.

## Multiple-Employer Driver (391.63)

Multiple-employer driver is a driver, who in any period of seven consecutive days, is employed or used as a driver by more than one motor carrier. The motor carrier must have on file the driver's name, social security number, identification number, type, issuing state of his/her motor vehicle operator's license, medical certificate, road test and certificate, and controlled substance test results, even if that driver's primary employment is with another carrier. The motor carrier must keep this information until three years after employment of the multiple-employer driver ceases.

## Drivers furnished by other Motor Carriers (391.65)

A motor carrier using a driver regularly employed by another motor carrier must have on file a signed written certificate that includes the driver's name and signature, certification of the driver's full qualifications, and expiration date of the driver's medical examiner's certificate. There is a specific format for this certification. See 391.65.

## **Disqualifying Offenses (391.15)**

A driver is disqualified from operating a commercial motor vehicle on public highways, for the following offenses:

- > Revocation, suspension, or withdrawal of an operator's license
- > Conviction or forfeiture of bond for the following criminal offenses while driving a CMV:
- > 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 violate an Out-of-Service Order.

## Penalties (See Tables under Part 383)

- > A first offender is disqualified for one year following conviction or forfeiture.
- > For a second offense within three years, a driver is disqualified for three years.

## **Driver Qualification File Checklist**

| Name of Driver                            |   |   | SSN:  |
|---|---|---|---|
| CDL Number:                               | State:  | Class:  | Endorsements:   |
| Date of Birth:                            | Hi  | re Date:  | Termination Date:   |
| The following documen                     | ts are to be included   | d in a Driver Qualifica                             | tion file for the duration of employment.   |
| Driver-specific app                       | lication for employm  | nent (§391.21);                                     |   |
| Original motor veh                        | icle record (MVR) re  | equested from state(s                               | ) within 30 days of hire (§391.23);   |
| Road test or road t                       | est exception:  |   |   |
| Road test                                 | form and certificate  | e conducted by your r                               | notor carrier (§391.31(g)), or  |
| Road test                                 | certificate conducte  | ed by another motor of                              | carrier within the past 3 years (§391.33(a)(2)), or   |
|   |   |   | not applicable if hired to operate doubles, triples, or<br>enewals required.) (§391.33(a)(1));  |
| Background Invest                         | igations (§391.23):   |   |   |
| employers<br>maintaine<br>Investigat      | s for the 3 years pric<br>d in accordance with<br>ion History file; and | or to the application of §391.53 (secured a         | Performance History data from all former DOT-regulat<br>date or a record of a good faith effort. This form must<br>and limited access) and may be in a separate Driver<br>ver rebuttals to the Safety Performance History data a<br>egulated employers. |
| The following documents ar                | e to be included in t   | the driver qualification                            | n file for three years from the date of execution:  |
| Medical certificate                       | or MVR showing that   | it driver is medically of                           | certified (§391.43(g)):   |
| Medical e                                 | xam certificate, orig   | inal or a copy, for all                             | non-CDL drivers; or   |
|   |   | inal or a copy, kept fo<br>edical certificate statu | or up to 15 days, until the CDL/CLP driver's MVR can b<br>is; or  |
| Current N                                 | IVR showing CDL/CL  | .P driver's medical ce                              | rtification status.   |
| If applicable, docum<br>(§391.51(b)(7);   | mentation of any va   | riance, exemption, or                               | waiver from the physical qualification standards  |
|   |   | as listed on National<br>lay 20, 2014) (§391.5      |   |
| Annual motor vehic                        | cle record (§391.25)  | ;   |   |
| Annual review of d                        | riving record (§391.  | 25);  |   |
| Annual list or certif                     | icate of violations fr  | om driver (§391.27).                                |   |
| The Driver Qualification file employment. | and Driver Investiga  | ation History file mus                              | t be retained for 3 years after a driver leaves your  |
| The following documents ar                | e also required and   | kept in the Driver Qu                               | alification file, but are not applicable to all drivers:  |
| Longer Combinatio                         | n Vehicle (LCV) Driv  | ver-Training Certificat                             | e (§380.401); and   |
| Entry-level driver t                      | raining certificate (§  | 380.509(b)).  |   |

Note: This form is provided as a suggested format for ensuring your DQ files are complete. A motor carrier does not need to have any form at all, as long as required items are in the DQ file.

## **Multiple-Employer Driver Qualification File Checklist**

## Multiple-Employer Drivers 49 CFR 391.63

If a motor carrier employs a person as a multiple-employer driver (as defined in 49 CFR 390.5), the motor carrier shall comply with all required parts of 391, except the carrier need not:

- 1. Require the person to furnish an application for employment (§391.21);
- 2. Make an inquiry into the person's driving record during the preceding three years to the appropriate State agency(s) and an investigation of the person's employment record during the preceding three years (§391.23);
- 3. Perform an annual driving record inquiry (§391.25)
- 4. Perform an annual review of the person's driving record (§391.25); or
- 5. Require the person to furnish a list or certificate of violations (§391.27).

However, the interpretation to 49 CFR 391.62 (Question #2 and answer) indicates that the first or primary employer of a multiple-employer driver must obtain a complete driver qualification file. Only subsequent employers may claim this exemption.

A Driver Qualification file for a driver meeting the "multiple employer driver" definition and employed under the rules in §391.63 must include:

## Driver Qualification (DQ) File Checklist Multiple-Employer Driver

| Name of Driver  |                 |                  | SSN:  |  |  |
|---|-----------------|------------------|---|--|--|
| CDL Number:   | State:Clas      |                  | Endorsements:   |  |  |
| Date of Birth:  | Hire Date:      |                  | Termination Date:   |  |  |
| Proof of medical cert   | ification, as d | escribed above   | (§391.43(g));   |  |  |
| Road test form and of road test (§391.33  |                 | 91.31(g)), or p  | hotocopy of a CDL or certificate accepted in lieu                                       |  |  |
| Driver's Name and Social Security Number; and   |                 |                  |   |  |  |
| $\Box$ Identification number, type, and issuing state of motor vehicle operator's license.  |                 |                  |   |  |  |
| Drive   | ers Borro       | wed From         | Another Motor Carrier   |  |  |
| For drivers who meet  | the criteria s  | et forth in §391 | .65(a)(1), a motor carrier may accept:  |  |  |
| A certificate completed by both the driver and primary employing motor carrier that meets the prescribed format in §391.65(a)(2) (Note: Motor carriers must verify the certificate's validity via phone, letter, or in person). |                 |                  |   |  |  |
| •   |                 |                  | or ensuring your DQ files are complete. A motor g as required items are in the DQ file. |  |  |

Note also: Even though 49 C.F.R. 391.64 allows the carrier limited exemptions from the listed requirements, the carrier may still require all items necessary for a complete DQ file.

## **APPLICATION FOR EMPLOYMENT**

| CO        | MPANY_           |                            |                          |               | STREE        | T ADDRES   | S          |          |          |                          |
|-----------|------------------|----------------------------|--------------------------|---------------|--------------|------------|------------|----------|----------|--------------------------|
| СІТ       | Y, STAT          | E AND Z                    | IP CODE                  |               |              |            |            |          |          |                          |
| NAM       | ИЕ(F             | irst)                      | (M                       | iddle)        | (Maider      | , if any)  | (La        | ast)     |          |                          |
| DA        | fe of b          | IRTH _                     |                          |               |              | SOCIAL S   | EC. NO     |          |          |                          |
| TEL       | EPHON            | E NUMBE                    | RS                       |               |              |            |            |          |          |                          |
|           |                  | EACH AD                    | DRESS FOR                | THE LAST THRE | E YEARS (ATT | ACH SHEET  | IF MORE SF | PACE IS  | NEEDED): |                          |
| ADI       | DRESS_           | (Street)                   |                          | (City)        | (State)      | (Zip Code) | HOW LON    | IG? _    |          |                          |
| ADI       | DRESS_           | (Street)                   |                          | (City)        | (State)      | (Zip Code) | HOW LON    | IG? _    |          |                          |
| ADI       | DRESS_           | (Street)                   |                          | (City)        | (State)      | (Zip Code) | _HOW LON   | IG? _    |          |                          |
|           |                  | EXPI                       | ERIENCE ANI              | QUALIFICATI   | ONS (ATTACH  | SHEET IF N | NORE SPACE | IS NEE   | EDED):   |                          |
|           | RIVER<br>ENSES   | STATE                      | LICENS                   | e number      | CLASS        | EN         | NDORSEMENT | S        | EXPIRA   | TION DATE                |
|           |                  |                            |                          |               |              |            |            |          |          |                          |
|           | CL               | ASS OF EQ                  | UIPMENT                  | TYPE OF EC    |              | FROM       | DATES      | <u> </u> |          | ATE NUMBER<br>ES (TOTAL) |
| DRIVING   | TRACTO<br>TRACTO |                            | MI-TRAILER<br>E TRAILERS |               |              | ТКОМ       |            |          |          |                          |
|           | OTHER            |                            |                          |               |              |            |            |          |          |                          |
| ACCIDENTS |                  | S (LAST THRE<br>MOST RECEN |                          | (H            | NATURE OF AC |            |            | FA       | TALITIES | INJURIES                 |
| AC        |                  |                            |                          |               |              |            |            |          |          |                          |

| NS<br>ES          | LOCATION | DATE | CHARGE | PENALTY |
|-------------------|----------|------|--------|---------|
| TUR               |          |      |        |         |
| IVIC<br>AN<br>FEI |          |      |        |         |
| OR ON             |          |      |        |         |
| ОĽ                |          |      |        |         |

Note: This form is provided as a suggested format for a commercial motor vehicle driver's application for employment. A motor carrier may use any format for an application for employment which complies with 391.21.

## Sample Employment Application Form – Page 2

Application for Employment (Reverse side, or page 2)

## ADVERSE LICENSING ACTIONS:

A. Have you ever been denied a license, permit, or privilege to operate a motor vehicle? Y/N \_

B. Has any license, permit, or privilege to operate a motor vehicle been suspended or revoked? Y/N \_\_\_\_\_

Explain below(or attach separate sheet if more space is needed):

### EMPLOYMENT RECORD (ATTACH SHEET IF MORE SPACE IS NEEDED):

NOTE: USDOT Requires that you list your employment history for at least the last 3 years and your Commercial Driving Experience for the Past 10 years:

| LAST EMPLOYER        |  |
|----------------------|--|
| NAME:                | FROM:                                    |
| ADDRESS:             | TO:                                      |
| POSITION HELD:       | SALARY <u>\$ per</u>                     |
| SUBJECT TO FMCSRs?   | SUBJECT TO DOT ALCOHOL AND DRUG TESTING? |
| REASON FOR LEAVING:  |  |
| SECOND LAST EMPLOYER |  |
| NAME:                | FROM:                                    |
| ADDRESS:             | TO:                                      |
| POSITION HELD:       | SALARY <u>\$ per</u>                     |
| SUBJECT TO FMCSRs?   | SUBJECT TO DOT ALCOHOL AND DRUG TESTING? |
| REASON FOR LEAVING:  |  |
| THIRD LAST EMPLOYER  |  |
| NAME:                | FROM:                                    |
| ADDRESS:             | TO:                                      |
| POSITION HELD:       | SALARY                                   |
| SUBJECT TO FMCSRs?   | SUBJECT TO DOT ALCOHOL AND DRUG TESTING? |
| REASON FOR LEAVING:  |  |

## APPLICANT MUST COMPLETE OR REVIEW THE ABOVE APPLICANT'S ORIGINAL SIGNATURE MUST APPEAR BELOW

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

(Date)

(Applicant's signature)

#### SAFETY PERFORMANCE HISTORY RECORDS REQUEST

| PART 1:           | TO E  | BE COMPLETE      | D BY PROSPEC                  | TIVE EMPLOYEE          |                       |
|-------------------|---|------------------|-------------------------------|------------------------|-----------------------|
|                   | •   |                  |                               |                        |                       |
|                   | irst  | M.I.             | Last                          |                        | ial Security Number   |
| Herebyauthorize   |   | 101.1.           | Last                          |                        | -                     |
| Previous Employ   | /er:  |                  |                               | Email <sup>.</sup>     | Date of Birth         |
|                   |   |                  |                               |                        |                       |
|                   |   |                  |                               |                        |                       |
| To release and f  | orward the information re<br>ting records within the p    | equested by sect | tion 3 of this docurr<br>from | ent concerning my Al   | cohol and Controlled  |
|                   |   |                  | (employn                      | nent application date) |                       |
| То:               | Prospective Employer:                                     |                  |                               |                        |                       |
|                   | Attention:  |                  |                               | Telephone:             |                       |
|                   | Street:   |                  |                               |                        |                       |
|                   | City, State, Zip:   |                  |                               |                        |                       |
|                   | ith §40.25(g) and 391.23<br>uch as fax, email, or lette   |                  | iis information mus           | t be made in a written | form that ensures     |
| Prospective emp   | loyer's fax number:                                       |                  |                               |                        |                       |
| Prospective emp   | loyer's email address: _                                  |                  |                               |                        |                       |
|                   | Applicant   | la Cignatura     |                               |                        | Data                  |
| This information  |   | 's Signature     | 0.05()                        |                        | Date                  |
| I his information | is being requested in cor                                 | npliance with §4 | 0.25(g) and 391.23            | •                      |                       |
| PART 2:           | ТО  | BE COMPLET       | TED BY PREVIO                 | US EMPLOYER            |                       |
|                   |   |                  | DENTHISTORY                   |                        |                       |
| I he applicant na | amed above was emplo                                      | yed by us. Yes   |                               |                        |                       |
| Employed as       |   | from (m/y)       |                               | to (m/y)               |                       |
|                   | rive motor vehicle for yc<br>ank 🗆 Doubles/Triples        |                  |                               |                        | Tractor-Semitrailer 🗆 |
|                   | eaving your employ: Di                                    |                  |                               |                        |                       |
|                   | ety performance history                                   |                  |                               |                        |                       |
|                   | complete the following for<br>3 years prior to the applic |                  |                               |                        |                       |
| Date              | e Locat   | tion             | # Injuries                    | # Fatalities           | HazmatSpill           |
| 1                 |   |                  |                               |                        |                       |
| 2                 |   |                  |                               |                        |                       |
| 3.                |   |                  |                               |                        |                       |
| -                 | nformation concerning a                                   | ny other acciden | ts involving the apr          | licant that were repor | ted to government     |
| agencies or insu  | rers or retained under int                                | ernal company p  | olicies:                      |                        |                       |
|                   |   |                  |                               |                        |                       |
|                   |   |                  |                               |                        |                       |
|                   |   |                  |                               |                        |                       |
| Any other remark  | <s:< td=""><td></td><td></td><td></td><td></td></s:<>     |                  |                               |                        |                       |
|                   |   |                  |                               |                        |                       |
| - <u></u>         |   |                  |                               |                        |                       |
| . <u></u>         |   |                  |                               |                        |                       |
|                   |   | Signature:       |                               |                        |                       |
|                   |   |                  |                               |                        |                       |
|                   |   |                  |                               |                        |                       |

# Safety Performance History Records Request – Page 2

#### PREVIOUS EMPLOYER – COMPLETE PAGE 2 PART 3

| PART 3: TO BE COMPLETED BY PREVIOUS EMPLOYER  |                |
|---|----------------|
| DRUG AND ALCOHOL HISTORY  |                |
| If driver was not subject to Department of Transportation testing requirements while employed by this emp<br>check here D, fill in the dates of employment fromtototo, complete bot<br>sign, and return.  |                |
| Driver was subject to Department of Transportation testing requirements fromto  |                |
| <ol> <li>Has this person had an alcohol test with the result of 0.04 or higher alcohol concentration?</li> <li>YES NO</li> </ol>  |                |
| 2. Has this person tested positive or adulterated or substituted a test specimen for controlled substance YES NO  | es?            |
| <ul> <li>3. Has this person refused to submit to a post-accident, random, reasonable suspicion, or follow-up alc controlled substance test?</li> <li>YES <ul> <li>NO <ul> </ul></li> </ul> </li> <li>NO <ul></ul></li></ul></li></ul></li></ul></li></ul></li></ul></li></ul></li></ul></li></ul></li></ul></li></ul></li></ul></li></ul></li></ul></li></ul></li></ul></li></ul></li></ul></li></ul></li></ul></li></ul></li></ul></li></ul></li></ul></li></ul></li></ul></li></ul></li></ul></li></ul></li></ul></li></ul></li></ul></li></ul></li></ul></li></ul></li></ul></li></ul></li></ul></li></ul></li></ul></li></ul></li></ul></li></ul></li></ul></li></ul></li></ul></li></ul></li></ul></li></ul></li></ul></li></ul></li></ul></li></ul></li></ul></li></ul></li></ul></li></ul></li></ul></li></ul></li></ul></li></ul></li></ul></li></ul></li></ul></li></ul></li></ul></li></ul></li></ul></li></ul></li></ul></li></ul></li></ul></li></ul></li></ul></li></ul></li></ul> | cohol or       |
| <ol> <li>Has this person committed other violations of Subpart B of Part 382, or Part 40?</li> <li>YES □ NO □</li> </ol>  |                |
| <ul> <li>5. If this person has violated a DOT drug and alcohol regulation, did this person complete a SAP-prescr<br/>rehabilitation program in your employ, including return-to-duty and follow-up tests? If yes, please ser<br/>documentation back with this form.</li> <li>YESNO</li> </ul>   |                |
| <ul> <li>6. For a driver who successfully completed a SAP's rehabilitation referral and remained in your employ driver subsequently have an alcohol test result of 0.04 or greater, a verified positive drug test, or refu</li> <li>YES NO</li> </ul>   |                |
| In answering these questions, include any required DOT drug or alcohol testing information obtained from employers in the previous 3 years prior to the application date shown on page 1.   | prior previous |
| Name:   |                |
| Company:  |                |
| Street:   |                |
| City, State, Zip:Telephone:   |                |
| Part 3 Completed by (Signature):Date:   |                |
| PART 4a: TO BE COMPLETED BY PROSPECTIVE EMPLOYER  |                |
| This form was (check one)  Faxed to previous employer  Mailed  Emailed  Other   |                |
| By:Date:  |                |
| PART 4b: TO BE COMPLETED BY PROSPECTIVE EMPLOYER  |                |
| Complete below when information is obtained.  |                |
| Information received from:  |                |
| Recorded by:Method: □ Fax □ Mail □ Email □ Tel  | lephone        |
| Date: □ Other   |                |
| INSTRUCTIONS TO COMPLETE THE SAFETY PERFORMANCE HISTORY RECORDS REQ   | UEST           |
| PAGE 1 PART 1: Prospective Employee PAGE 2 PART 3: Previous Employer  |                |
| Complete the information required in this section     Complete the information required in this section   |                |
| <ul> <li>Sign and date</li> <li>Submit to the Prospective Employer</li> <li>Sign and date</li> <li>Return to Prospective Employer</li> </ul>  | ver            |
|   |                |
| PAGE 2 PART 4a: Prospective Employer     Complete the information     PAGE 2 PART 4b: Prospective Employer     Record receipt of the information  |                |
| Send to Previous Employer     Retain the form   |                |
| <ul> <li>PAGE 1 PART 2: Previous Employer</li> <li>Complete the information required in this section</li> <li>Sign and date</li> <li>Turn form over to complete SIDE 2 SECTION 3</li> </ul>   |                |

#### RECORDS REQUEST FOR DRIVER/APPLICANT SAFETY PERFORMANCE HISTORY

This request is made by the driver/applicant in compliance with the Department of Transportation regulations.

| §391.23(i)(2)                 | three years, and wish to review previous employer<br>request to the prospective employer, which may be<br>thirty (30) days after being employed or being notif<br>must provide this information to the applicant within<br>If the prospective employer has not yet received the<br>then the five-business-days deadline will begin who<br>safety-performance history information. If the drive | rtation regulated employment history in the preceding<br>-provided investigative information must submit a written<br>a done at any time, including when applying, or as late as<br>ed of denial of employment. The prospective employer<br>in five (5) business days of receiving the written request.<br>e requested information from the previous employer(s),<br>en the prospective employer receives the requested<br>r has not arranged to pick up or receive the requested<br>mployer making them available, the prospective motor<br>her request to review the records. |
|-------------------------------|--|---|
| PART 1:                       | COMPLETED BY THE DE  | RIVER/APPLICANT   |
| TO:                           |  |   |
|                               | Prospective Employer:  |   |
|                               | Street/P.O. Box:   |   |
|                               | City, State, Zip:  | Telephone #   |
| FROM:                         |  |   |
|                               |  | Social Security/I.D. #  |
|                               | Street:  |   |
|                               | City, State, Zip:  | Telephone #   |
| preceding thre                | ee years. I understand, for records requested from a<br>quested records within thirty (30) days of the records   | nent of Transportation Safety Performance History for the<br>prospective employer, that I must arrange to pick up or<br>being made available or I have waived my request to   |
| This informatio               | on should be: □ sent to me at the above address.<br>□ I will arrange to pick up.   |   |
| Driver/Applicar               | nt Signature:  | Date:/ /<br>M D Y   |
| PART 2:                       | COMPLETED BY THE PRO   |   |
| The informatio prospective en | on must be provided to the applicant within five (5) bu  | siness days of receiving the written request. If the on from the previous employer(s), then the five-business-  |
| Information s                 | supplied to:   |   |
| Name <sup>.</sup>             |  |   |

| Name:                                  |             |                 |   |   |        | — |
|--|-------------|-----------------|---|---|--------|---|
| Street:                                |             |                 |   |   |        |   |
| City, State, Zip:                      |             |                 |   |   |        |   |
| Comments:                              |             |                 |   |   |        | _ |
|  |             |                 |   |   |        |   |
| By:                                    |             | Delesse Deter   |   | , | 1      |   |
| Signature/person providing information | Telephone # | _ Release Date: | М | D | /<br>Y |   |
|  |             |                 |   |   |        |   |

COPY 1 PROSPECTIVE EMPLOYER

# **Texas DPS Application for Copy of Driving Record**

|  | AS DPS   |  |
|--|--|--|
|  | rtment of Public Safety, Box 149008, Austin  | n, TX 78714-9008   |
| DO NOT MAIL CASH. Mail check or money orde   | Any questions regarding the informat   | ion on this form should be directed to   |
| payable to: Texas Department of Public Safety  | the Contact Center at 512-424-20   | 800. Allow 2-3 weeks for delivery.   |
| Check Type of Record Desired   |  | FEE  |
| 1. Name – DOB – License Status – Late  |  | \$ 4.00  |
|  | ar Record only lists Crashes/Moving Violations.  | \$ 6.00  |
|  | rd is Not acceptable for a Defensive Driving Course  |  |
|  | ord of ALL Crashes/Violations. Furnished to Licen  |  |
| _  | d to Licensee Only and is Acceptable for DDC.  | \$ 10.00   |
| 4. Abstract Record – Certified abstract o  |  | \$ 20.00   |
| Other: (Original Application, DWLI, etc.)  | 1 1 1 1 1 1 1 1 1 1 1 1 1  | IIIII \$11.00<br>(If Required)   |
| lall Driver Record To: (Please Print or  | Туре)  |  |
| TTTTTTTTTT   |  | 1.1.1.1  |
| Requestor's Last Name  | Requestor's First Name   |  |
| Street Address   | IIIIIIIIIIII<br>Texas Driv   | Ver License Number   |
| LIIIIIII<br>Chy  | III III III III<br>State Zip Code Davtime  | - I I I - I I I I I<br>Telephone Number (Include grea code)  |
|  | zation, or other entity, please include the follow   | ing:   |
|  |  |  |
| Name of business, organization; entity, etc.   |  |  |
| 111111111111   |  | 1.1.1.1.1  |
| Your Title or Attilation with above  |  | 1.1.1.1.1  |
| Type of business, organization, etc. (i.e., insurance provider, to   | wing company, private investigation, firm, etc.)   |  |
| nformation Requested On:   |  |  |
| TELEVITE ET  | LWIMINED DIVENTY DV DV D   | LITTIC   |
| exas Driver License Number   | Date of Bith   | Suffx (SR, JR, etc.)   |
| 1111111111111111   | 1111111111111111111  | 1 1 1 1 1 1 1 1  |
| ast Name   |  |  |
| IIIIIIIIIIIIII   |  |  |
|  |  | TTTTTTTT   |
| dividual's Written Consent For ONE 7   | IME Belease to Above Bequestor   |  |
|  | ns listed on the back of this form, please be advised  | that without the written consent of the drive  |
| ense/ID card holder, the record you receive will n   |  |  |
|  | hereby certify that I granted access on thi  | s one occasion to my Driver License/ID Car   |
| cord, inclusive of the personal information (name  | address, driver identification number, etc.) to  |  |
|  | al Quadra  | Pate   |
| gnature of License / ID Card Holder or Parent /Le  |  | Date   |
| seq.) and Texas Transportation Code Chapter 730<br>e DPS could result in the denial to release any driv<br>I receive personal information as a result of this re | stors to Agree to the Following:<br>ge that this disclosure is subject to the federal Driver's P<br>D. False statements or representations to obtain person,<br>wer record information to myself and the entity for which<br>equest, it may only be used for the stated purpose and<br>folations of that section may result in a criminal charge | al information pertaining to any individual from<br>I made the request. Further, I understand the<br>I may only resell or redisclose the information |
| certify that I have read and agree with the above or<br>g this driver record on behalf of an entity, I also or   | onditions and that the information provided by me in th<br>entity that I am authorized by that entity to make this rec<br>and any state and federal privacy law can subject me   | is request is true and correct. If I am reques<br>quest on their behalt. I also acknowledge that   |
| gnature of Requestor   |  | Date   |
|  |  |  |

| Texas Department<br>of Public Safety |   | Save Time – Request Your Driver Record Online<br>www.texas.gov  |  |
|--------------------------------------|---|---|--|
|                                      |   | Important Instructions – Read Carefully   |  |
| of their identity an                 | nd a certification by the   | may disclose personal information to a requestor without written consent of the DL/ID holds<br>requestor that the use of the personal information is authorized under state and federal la<br>purpose stated and in complete compliance with state and federal law.   |  |
|                                      |   | owing exceptions if you do not have written consent of the DL/ID holder to be entitled<br>med individual. Please <u>initial</u> each category that applies to the requested driver red  |  |
| 1.                                   | vehicle emissions; (d)<br>or motor vehicle deal<br>records of a motor veh   | with any matter of (a) motor vehicle or motor vehicle operator safety; (b) motor vehicle thef<br>motor vehicle product alterations, recalls, or advisories; (e) performance monitoring of mot<br>lers by a motor vehicle manufacturer; or (f) removal of nonowner records from the orig<br>hicle manufacturer to carry out the purposes of the Automobile Information Disclosure Act, ti<br>e Clean Air Act, and any other statute or regulation enacted or adopted under or in relation. | or vehicle<br>in al owne<br>he Anti Ca |
| 2.                                   |   | stract) For use by a government agency in carrying out its functions or a private entity acting<br>incy in carrying out its functions.  | ) on beha                              |
| 3.                                   | vehicle product altera<br>motor vehicle dealers   | with a matter of (a) motor vehicle or motor vehicle operator safety; (b) motor vehicle theft<br>ations, recalls, or advisories; (d) performance monitoring of motor vehicles, motor vehicl<br>; (e) motor vehicle market research activities, including survey research; or (f) removal of<br>nal owner records of motor vehicle manufacturers.   | e parts, c                             |
| 4.                                   | fy the accuracy of per<br>and to obtain correct   | course of business by a legitimate business or an authorized agent of the business, but o<br>rsonal information submitted by the individual to the business or the authorized agent of the<br>t information if the submitted information is incorrect to prevent traud by pursuing a leg<br>on a debt or security interest against the individual.  | e busines                              |
|                                      | or government agency  | stract) For use in conjunction with a civil, criminal, administrative, or arbitral proceeding in<br>y or before any self regulatory body, including service of process, investigation in anticipation<br>procement of a judgement or order, or under an order of any court.   |  |
| 6.                                   | For use in research or<br>used to contact any in  | r in producing statistical reports, but only if the personal information is not published, redi-<br>individual.   | sclosed, o                             |
| 7.                                   |   | or insurance support organization, or by a self insured entity, or an authorized agent of th<br>s investigation activities, antifraud activities, rating or underwriting.   | e entity,                              |
|                                      | For use in providing n  | otice to an owner of a towed or impounded vehicle.  |  |
| 9.                                   | For use by a licensed   | private investigator agency or licensed security service for a purpose permitted as stated or   | this page                              |
| 10.                                  | (Valid for Certified Abstract) For use by an employer or an authorized agent or insurer of the employer to obtain or verify information relating to a holder of a commercial driver license that is required under 49 U.S.C. Chapter 313. |   |  |
| 11.                                  | For use in connection   | with the operating of a private toll transportation facility.   |  |
|                                      | For use by a consumer-reporting agency as defined by the Fair Credit Reporting Act (15 U.S.C. §1681 et seq.) for a purpose permitted under the Act.   |   |  |
| 13.                                  | For any other purpose   | e specifically authorized by law that relates to the operation of a motor vehicle or to public  | safety.                                |
|                                      | Please state specific s   | statutory authority   |  |
| 14.                                  |   | nting, detecting, or protecting against identity theft or other acts of fraud. The Departme<br>formation may require additional information.  | ent prior t                            |
| 3elow is an exa                      | mple of how number  | s and letters should be written on front of this form:  |  |
| 1,2,3,4,5                            | 16171819101   |   |  |
| ARCDE                                | ECUTT   | L MINO PQR STUVY  |  |

## **Request for Driving Record (and Release) - other than Texas**

(Driver's Name)

(Driver's Operators License Number)

(Driver's Social Security Number)

Dear\_\_\_\_\_:

The above named individual has made application with us for employment as a driver. Applicant has indicated that the above numbered operator's license or permit has been issued by your state to applicant, and that it is in good standing.

In accordance with 49 C.F.R. 391.23(a)(1) of the Federal Motor Carrier Safety Regulations, we are required to make an inquiry into the applicant's driving record during the preceding 3 years of every state in which the applicant has held a motor vehicle operator's license or permit during those 3 years.

Therefore, please certify to us what the individual's driving record is for the preceding 3 years, or certify that no such record exists if that be the case.

In the event this letter does not satisfy your requirements for making such inquiries, please send us instructions and forms of yours as are necessary for us to complete our inquiry into the driving record of this applicant.

Respectfully yours,

Signature of individual making this inquiry

Printed name of person making this inquiry

Title of person making this inquiry

Name of Motor Carrier

Phone Number

FAX Number

|--|

Note: This form is provided as a suggested format for requesting a driving record from a jurisdiction other than Texas. No format is prescribed, and each jurisdiction may have its own form.

#### **Road Test Examination Form**

#### DRIVER'S ROAD TEST EXAMINATION

| Driver's Name    |           | Phone Number | r   |  |
|------------------|-----------|--------------|-----|--|
| Driver's Address |           |              |     |  |
| City             | <br>State | Zip Co       | ode |  |

The road test shall be given by the motor carrier or a person designated by the motor carrier. However, a driver who is a motor carrier must be given the test by another person. The test shall be given by a person who is competent to evaluate and determine whether the person who takes the test has demonstrated that he or she is capable of operating the vehicle and associated equipment that the motor carrier intends to assign.

| Rating of<br>Performance | Task (as required by 49 C.F.R. 391.31)   |  |  |  |  |
|--------------------------|--|--|--|--|--|
|                          | The pre-trip inspection (as required by 49 C.F.R. 392.7)   |  |  |  |  |
|                          | Coupling and uncoupling of combination units, if the equipment he/she may drive includes combination units |  |  |  |  |
|                          | 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 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, please explain:   |  |  |  |  |
| Type of equipment        | used in giving the road test:  |  |  |  |  |
| Date                     | Examiner's Signature   |  |  |  |  |
| Examiner's Title         | Examiner's Printed Name  |  |  |  |  |
| If the road test is s    | uccessfully completed, the person who gave it shall complete a certificate of driver's road test.          |  |  |  |  |
| Examiner's Remark        | S:   |  |  |  |  |

Note: This form is provided as a suggested format for recording a driver's road test. A motor carrier may use any format for documenting road tests which complies with 391.31.

# **Certification of Road Test**

*Instructions:* If a road test is successfully completed (see previous form), the person who gave it shall complete a certificate of driver's road test. The original or a copy must be retained in the employing motor carrier's driver qualification file for the person examined. A copy should be given to the person who was examined.

| CERTIFICATION OF ROAD TEST UNDE  | ER 49 C.F.R. 391.31                          |
|--|--|
| Driver's name  |  |
| Social Security No.  |  |
| Operator's or Chauffeur's License No   | State  |
| Type of power unit   |  |
| Type of trailer(s)   |  |
| If passenger carrier, type of bus  |  |
| This is to certify that the above-named driver was given, 20, consisting of approximately  |  |
| It is my considered opinion that this driver possesses sufficient<br>commercial motor vehicle listed above.  | driving skills to operate safely the type of |
| (Signature of examiner)  |  |
| (Title)  |  |
| (Organization and address of examiner)   |  |
| Note: This form is provided as a suggested format for certify may use any format for certifying road tests which complies with the second seco |  |

#### Motor Vehicle Driver's Certification of Violations

#### MOTOR VEHICLE DRIVER'S CERTIFICATION OF VIOLATIONS Under 49 C.F.R. 391.27

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.

| Date | Offense | Location | Type of Vehicle<br>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.

 Driver's Signature
 Date of Certification

 Motor Carrier's Name
 Motor Carrier's Address

 Reviewed by (Signature)
 Reviewed by (Title)

 Reviewed by (Printed Name)
 Date of Review

Note: This form is provided as a suggested format for a commercial motor vehicle driver's certification of violations. A motor carrier may use any format which complies with 49 CFR 391.21.

#### ANNUAL REVIEW OF DRIVING RECORD Under 49 C.F.R. 391.25

| Driver's Name (Last, First, M.I.)  | Social Security Number  |
|--|---|
| in accordance with 49 C.F.R. 391.25 of<br>considered any evidence that the driver h<br>Regulations in this subchapter or Hazardo<br>C). I also considered the driver's acciden<br>laws governing the operation of motor v<br>speeding, reckless driving, and operating | reviewed the driving record of the above named dr<br>the Federal Motor Carrier Safety Regulations. In<br>has violated any applicable Federal Motor Carrier Sa<br>bus Materials Regulations (49 CFR chapter I, subcha<br>t record and any evidence that the driver has violated<br>rehicles. I/we gave great weight to violations, such<br>g while under the influence of alcohol or drugs,<br>disregard for the safety of the public. Having done |
| <u>First annual review</u>   |   |
| the driver meets the minimum require<br>the driver is disqualified to drive a co   | rements for safe driving, or<br>ommercial motor vehicle pursuant to 49 C.F.R. 391.15.   |
| Reviewer's Signature   | Date of Review  |
| Reviewer's printed name and title  | Motor Carrier's Name  |
| Second annual review   |   |
| the driver meets the minimum require<br>the driver is disqualified to drive a co   | rements for safe driving, or<br>ommercial motor vehicle pursuant to 49 C.F.R. 391.15.   |
| Reviewer's Signature   | Date of Review  |
| Reviewer's printed name and title  | Motor Carrier's Name  |
| <u>Third annual review</u>   |   |
| the driver meets the minimum require<br>the driver is disqualified to drive a co   | rements for safe driving, or<br>ommercial motor vehicle pursuant to 49 C.F.R. 391.15.   |
| Reviewer's Signature   | Date of Review  |
|  |   |

Note: This form is provided as a suggested format for documenting the annual review of a driver's driving record. A motor carrier may use any format for documenting the annual review which complies with 391.25.

## **Medical Examiner's Certificate**

To obtain the current Medical Examiners Certificate (MEC) or Medical Examiners Report (MER) go to the following link at the FMCSA website. <u>https://www.fmcsa.dot.gov/medical/driver-medical-requirements/medical-applications-and-forms</u>

|   | that collection of information displays a current valid OMB Control N<br>including the time for reviewing instructions, gathering the data need                              | umber. The OMB Control Number for this inform<br>ded, and completing and reviewing the collection | jest to a penalty for follow to comply with a collection of information subject to the requirements of the Paperwork Reduction Ast unle<br>nation collection à 213-6006, Public reporting for this collection of information is estimated to be approximated y 1 minute par respons<br>ion of information. M responses to this collection of Information are manufatory. Send comments regarding this bunden estimate or an<br>ion Clearance Officer, Federal Motor Camier Saley Administration, MC - IRMA, 1200 New Jerzy Avenue, S. Washington, DC 20590. |
|---|--|---|---|
| The Federal Motor Carrier Safety Regulations (49 CFR 391.41.391.49) and, with knowledge of the driving duties, 1 find this person is qualified, and, if applicable, only when ( <i>check all that apply</i> ):  | ederal Motor Carrier   |   |   |
| The Federal Motor Carrier Safety Regulations (49 CFR 391.41-391.49) with any applicable State variances (which will only be valid for intrastate operations), and, with knowledge of the driving de Lifid this person is qualified, and, if applicable, only when ( <i>check all that apply</i> ):            Wearing corrective lenses           Accompanied by a  | certify that I have examined Last Name:  | First Name:   | in accordance with (please check only one):   |
| he information I have provided regarding this physical examination is true and complete. A complete Medical Examination Report Form,<br>AcCA-5875, with any attachments embodies my findings completely and correctly, and is on file in my office.<br>Medical Examiner's Telephone Number Date Certificate Signed<br>Medical Examiner's Name (please print or type)<br>Medical Examiner's State License, Certificate, or Registration Number<br>Medical Examiner's State License, Certificate, or Registration Number<br>Driver's Signature<br>Driver's Signature<br>Medical Examiner's License Number<br>Medical Examiner's State/Province  | the Federal Motor Carrier Safety Regulations ( <u>49 CFR 39</u><br>I find this person is qualified, and, if applicable, only who<br>Wearing corrective lenses Accompanied by | 1 <u>.41-391.49</u> ) with any applicable State<br>on <i>(check all that apply):</i><br>awaiver/e | te variances (which will only be valid for intrastate operations), and, with knowledge of the driving duti<br>exemption Driving within an exempt intracity zone ( <u>49 CFR 391.62</u> ) ( <i>Federal</i> )<br>Certificate Qualified by operation of <u>49 CFR 391.64</u> ( <i>Federal</i> )  |
| Medical Examiner's Name (please print or type)       MD       Physician Assistant       Advanced Practice Nurse         Mol       DO       Chiropractor       Other Practitioner (specify)         Medical Examiner's State License, Certificate, or Registration Number       Issuing State       National Registry Number         Priver's Signature       Driver's License Number       Issuing State/Province   | ICSA-5875, with any attachments embodies my findings c   |   | mplete Medical Examination Report Form,<br>e in my office.  |
| Image: Construction of the co |  |   |   |
| Driver's Signature Driver's License Number Issuing State/Province   | Medical Examiner's Name (please print or type)   |   |   |
|   | Nedical Examiner's State License, Certificate, or Registr  | ation Number  |   |
|   |  |   |   |
|   |  |   | Drivar's Liconso Number   |
|   |  |   | Driver's License Number issuing State/Province  |
| treet Address: Zip Code: Zip Code: Zip Code: O Yes O No   |  |   |   |

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| rm MCSA-5875   |  |   | OMB No. 21   | 26-0006 Expiration Date: 9/30/20                    |
|--|--|---|--|---|
| Public Burden Statement<br>A Federal agency may not conduct or sponsor, and<br>the Paperwork Reduction Act unless that collection                                |  |   |  |   |
| of information is estimated to be approximately 25<br>responses to this collection of information are man<br>Information Collection Clearance Officer, Federal M | minutes per response, including the time for redatory. Send comments regarding this burden | viewing instructions, gathering the o<br>estimate or any other aspect of this o | data needed, and completing and review<br>collection of information, including sugge | ing the collection of information. All              |
| S. Department of Transportation<br>ederal Motor Carrier  | · · · · · · · · · · · · · · · · · · ·  | ination Report For  |  |   |
| afety Administration   |  | Driver Medical Certification)   |  |   |
|  |  |   |  | MEDICAL RECORD #                                    |
| ECTION 1. Driver Information (to be fille  | ad out by the driver   |   |  | (or sticker)  |
|  |  |   |  |   |
| ERSONAL INFORMATION  | First Namo:  | Middle In   | itial: Date of Pirth   |   |
| ast Name:<br>treet Address:  |  |   |  |   |
|  |  |   |  |   |
| river's License Number:  |  |   |  |   |
|  |  |   | ed By**:   |   |
| as your USDOT/FMCSA medical certifica  | te ever been denied or issued fo   |   |  |   |
| /CDL Applicant/Holder: See instructions for definitions.   |  |   | at type of photo ID was used to verify the identi                                    | ty of the driver. e.g., CDL. driver's license, pass |
| RIVER HEALTH HISTORY   |  |   |  |   |
| lave you ever had surgery? If "yes," please  | e list and explain below.  |   |  | ⊖Yes ⊖No ⊖Not Su                                    |
|  |  |   |  |   |
|  |  |   |  |   |
|  |  |   |  |   |
|  |  |   |  |   |
|  |  |   |  |   |
|  |  |   |  |   |
|  |  |   |  |   |
| Are you currently taking medications (#<br>If "yes," please describe below.  | prescription, over-the-counter, herb   | al remedies, diet suppleme  | nts) <b>?</b>  | ○ Yes ○ No○ Not Su                                  |
|  |  |   |  |   |
|  |  |   |  |   |
|  |  |   |  |   |
|  |  |   |  |   |
|  |  |   |  |   |
|  |  |   |  |   |
|  |  |   |  |   |
|  |  |   |  |   |
|  |  |   |  | additional sheets if necessary)                     |

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#### A Texas Motor Carrier's Guide to Highway Safety

Medical Examination Report Form Page 2

| Form MCSA-5875   |               |            |            |             | OMB No. 2126-0006 Expirat   | ion Da     | te: 9/3    | 0/2019      |
|--|---------------|------------|------------|-------------|---|------------|------------|-------------|
| Last Name:   | First Name:   |            |            |             | DOB: Exam Date:   |            |            |             |
| DRIVER HEALTH HISTORY (continued)  |               |            |            |             |   |            |            |             |
| Do you have or have you ever had:  |               | Yes        | No         | Not<br>Sure |   | Yes        | No         | Not<br>Sure |
| 1. Head/brain injuries or illnesses (e.g., concussion                                | on)           | $\bigcirc$ | $\bigcirc$ | $\bigcirc$  | 16. Dizziness, headaches, numbness, tingling, or memory                                 | $\bigcirc$ | $\bigcirc$ | $\bigcirc$  |
| 2. Seizures, epilepsy  |               | $\bigcirc$ | Ο          | $\bigcirc$  | loss  |            |            |             |
| <b>3. Eye problems</b> (except glasses or contacts)                                  |               | 0          | 0          | $\bigcirc$  | 17. Unexplained weight loss   | $\bigcirc$ | $\bigcirc$ | $\bigcirc$  |
| 4. Ear and/or hearing problems   |               | $\bigcirc$ | $\bigcirc$ | $\bigcirc$  | 18. Stroke, mini-stroke (TIA), paralysis, or weakness                                   | $\bigcirc$ | $\bigcirc$ | $\bigcirc$  |
| 5. Heart disease, heart attack, bypass, or other                                     | heart         | $\bigcirc$ | $\bigcirc$ | $\bigcirc$  | 19. Missing or limited use of arm, hand, finger, leg, foot, toe                         | $\bigcirc$ | $\bigcirc$ | $\bigcirc$  |
| problems   |               | 0          | 0          | 0           | 20. Neck or back problems   | $\bigcirc$ | $\bigcirc$ | $\bigcirc$  |
| 6. Pacemaker, stents, implantable devices, or ot                                     | her heart     | $\bigcirc$ | $\bigcirc$ | $\bigcirc$  | 21. Bone, muscle, joint, or nerve problems  | $\bigcirc$ | $\bigcirc$ | $\bigcirc$  |
| procedures   |               |            |            |             | 22. Blood clots or bleeding problems  | $\bigcirc$ | $\bigcirc$ | $\bigcirc$  |
| 7. High blood pressure   |               | $\bigcirc$ | $\bigcirc$ | $\bigcirc$  | 23. Cancer  | $\bigcirc$ | $\bigcirc$ | 0           |
| 8. High cholesterol  |               | $\bigcirc$ | $\bigcirc$ | $\bigcirc$  | 24. Chronic (long-term) infection or other chronic diseases                             | $\bigcirc$ | $\bigcirc$ | $\bigcirc$  |
| <ol><li>Chronic (long-term) cough, shortness of bre<br/>breathing problems</li></ol> | ath, or other | 0          | 0          | $\bigcirc$  | 25. Sleep disorders, pauses in breathing while asleep, daytime sleepiness, loud snoring | 0          | 0          | 0           |
| 10. Lung disease (e.g., asthma)  |               | $\bigcirc$ | $\bigcirc$ | $\bigcirc$  | 26. Have you ever had a sleep test (e.g., sleep apnea)?                                 | $\bigcirc$ | $\bigcirc$ | $\bigcirc$  |

| <b>10. Lung disease</b> (e.g., asthma)                              | $\circ \circ \circ$              | 26. Have you ever had a sleep test (e.g., sleep apnea)?                         | 000                 |
|---|----------------------------------|---|---------------------|
| 11. Kidney problems, kidney stones, or pain/problems with urination | $\circ \circ \circ$              | 27. Have you ever spent a night in the hospital?                                | 000                 |
| 12. Stomach, liver, or digestive problems                           | $\bigcirc$ $\bigcirc$ $\bigcirc$ | 28. Have you ever had a broken bone?  | 0 0 0               |
| 13. Diabetes or blood sugar problems                                |                                  | 29. Have you ever used or do you now use tobacco?                               | $\circ \circ \circ$ |
| Insulin used  |                                  | 30. Do you currently drink alcohol?   | $\circ \circ \circ$ |
| 14. Anxiety, depression, nervousness, other mental health problems  | 000                              | 31. Have you used an illegal substance within the past two years?               | 000                 |
| 15. Fainting or passing out   | $\circ \circ \circ$              | 32. Have you ever failed a drug test or been dependent on an illegal substance? | 000                 |
|   |                                  |   |                     |

Other health condition(s) not described above:

Did you answer "yes" to any of questions 1-32? If so, please comment further on those health conditions below.

 $\bigcirc$  Yes  $\bigcirc$  No  $\bigcirc$  Not Sure

 $\bigcirc$  Yes  $\bigcirc$  No  $\bigcirc$  Not Sure

(Attach additional sheets if necessary)

#### **CMV DRIVER'S SIGNATURE**

I certify that the above information is accurate and complete. I understand that inaccurate, false or missing information may invalidate the examination and my Medical Examiner's Certificate, that submission of fraudulent or intentionally false information is a violation of 49 CFR 390.35, and that submission of fraudulent or intentionally false information may subject me to civil or criminal penalties under 49 CFR 390.37 and 49 CFR 386 Appendices A and B.

Driver's Signature:

Form M

**SECTION 2. Examination Report** (to be filled out by the medical examiner)

#### **DRIVER HEALTH HISTORY REVIEW**

Review and discuss pertinent driver answers and any available medical records. Comment on the driver's responses to the "health history" questions that may affect the driver's safe operation of a commercial motor vehicle (CMV).

Date:

| Form MCSA-5875  |                   |                |                    |               |  |               | OMB No. 2126- | 0006 Expiratio | on Date: 9/30/2019 |
|---|-------------------|----------------|--------------------|---------------|--|---------------|---------------|----------------|--------------------|
| Last Name:  |                   |                | First Name:        |               | DOB:   |               | Exam [        | Date:          |                    |
| TESTING   |                   |                |                    |               |  |               |               |                |                    |
| Pulse rate:   | Pulse rhyth       | m regular: 🔿   | Yes 🔿 No           |               | Height:feetinches  | Weight:       | pounds        |                |                    |
| <b>Blood Pressure</b>   | Systolic          |                | Diastolic          |               | Urinalysis   | Sp. Gr.       | Protein       | Blood          | Sugar              |
| Sitting   |                   |                |                    |               | Urinalysis is required.  |               |               |                |                    |
| Second reading<br>(optional)  |                   |                |                    |               | Numerical readings must be recorded.   |               |               |                |                    |
| Other testing if indic  | cated             |                |                    |               | Protein, blood, or sugar in ti   |               |               | ion for furthe | r testing to       |
|   |                   |                |                    |               | rule out any underlying me   | aicai problem |               |                |                    |
| <b>Vision</b><br>Standard is at least 20,<br>least 70° field of vision<br>rective lenses should b | in horizontal mei | ridian measure | d in each eye. The |               | <b>Hearing</b><br>Standard: Must first perceive<br>hearing loss of less than or ea |               |               |                |                    |
| Acuity  | Uncorrected       | Corrected      | Horizontal Fiel    | d of Vision   | Check if hearing aid used  | for test: 🗌   | Right Ear 🗌   |                |                    |
| Right Eye:  | 20/               | 20/            | Right Eye:         | degrees       | Whisper Test Results   |               |               | 5              | Ear Left Ear       |
| Left Eye:   |                   |                | Left Eye:          |               | Record distance (in feet) fr<br>whispered voice can first                          |               | which a fore  | ted            |                    |
| Both Eyes:  | 20/               | 20/            |                    | Yes No        | OR   |               |               |                |                    |
| Applicant can recog signals and devices   |                   |                |                    | 0 0           | Audiometric Test Result<br>Right Ear   | S             | Left Ear      |                |                    |
| Monocular vision  |                   |                |                    | $\circ \circ$ | 500 Hz 1000 Hz 2   | 2000 Hz       | 500 Hz        | 1000 Hz        | 2000 Hz            |
| Referred to ophthalr  | nologist or opto  | ometrist?      |                    | $\circ \circ$ |  |               |               |                |                    |
| Received document   | ation from opht   | halmologist o  | or optometrist?    | 0 0           | Average (right):   |               | Average (le   | eft):          |                    |

#### PHYSICAL EXAMINATION

The presence of a certain condition may not necessarily disqualify a driver, particularly if the condition is controlled adequately, is not likely to worsen, or is readily amenable to treatment. Even if a condition does not disqualify a driver, the Medical Examiner may consider deferring the driver temporarily. Also, the driver should be advised to take the necessary steps to correct the condition as soon as possible, particularly if neglecting the condition could result in a more serious illness that might affect driving.

Check the body systems for abnormalities.

| Body System  | Normal       | Abnormal       | Body System   | Normal     | Abnorma    |
|--|--------------|----------------|---|------------|------------|
| 1. General   | $\bigcirc$   | $\bigcirc$     | 8. Abdomen  | $\bigcirc$ | $\bigcirc$ |
| 2. Skin  | $\bigcirc$   | $\bigcirc$     | 9. Genito-urinary system including hernias          | $\bigcirc$ | $\bigcirc$ |
| 3. Eyes  | $\bigcirc$   | $\bigcirc$     | 10. Back/Spine                                      | $\bigcirc$ | $\bigcirc$ |
| 4. Ears  | $\bigcirc$   | $\bigcirc$     | 11. Extremities/joints                              | $\bigcirc$ | $\bigcirc$ |
| 5. Mouth/throat  | $\bigcirc$   | $\bigcirc$     | 12. Neurological system including reflexes          | $\bigcirc$ | $\bigcirc$ |
| 6. Cardiovascular  | $\bigcirc$   | $\bigcirc$     | 13. Gait  | $\bigcirc$ | $\bigcirc$ |
| 7. Lungs/chest   | $\bigcirc$   | $\bigcirc$     | 14. Vascular system                                 | $\bigcirc$ | $\bigcirc$ |
| Discuss any abnormal answers in detail in the space below<br>Enter applicable item number before each comment. | v and indice | ate whether it | would affect the driver's ability to operate a CMV. |            |            |

(Attach additional sheets if necessary)

| Form MCSA-5875                       |  |                                     | OMB No. 212                          | 6-0006 Expiration Date: 9/30/2019 |
|--------------------------------------|--|-------------------------------------|--------------------------------------|-----------------------------------|
| Last Name:                           | First Name:  | DOB:                                | Exan                                 | Date:                             |
| Please complete only one of the      | e following (Federal or State) Medical E   | Examiner Determination section      | 15:                                  |                                   |
| MEDICAL EXAMINER DETERMI             | NATION (Federal)   |                                     |                                      |                                   |
| Use this section for examinations    | performed in accordance with the Federa  | Il Motor Carrier Safety Regulations | 6 <mark>(49 CFR 391.41-391.49</mark> | ):                                |
| O Does not meet standards (sp        | ecify reason):   |                                     |                                      |                                   |
| O Meets standards in <u>49 CFR 3</u> | 91.41; qualifies for 2-year certificate  |                                     |                                      |                                   |
| ○ Meets standards, but period        | ic monitoring required (specify reason):   |                                     |                                      |                                   |
| Driver qualified for: 03             | months 🔘 6 months 🔵 1 year   | O other (specify):                  |                                      |                                   |
|                                      | Wearing hearing aid Acco   |                                     |                                      |                                   |
|                                      | ormance Evaluation (SPE) Certificate   | Qualified by operation of <u>49</u> | CFR 391.64 (Federal)                 |                                   |
|                                      | tracity zone (see <u>49 CFR 391.62) (Federal)</u>  |                                     |                                      |                                   |
|                                      | cify reason):  |                                     |                                      |                                   |
|                                      | office for follow-up on (must be 45 days c   |                                     |                                      |                                   |
|                                      | port amended (specify reason):   |                                     |                                      |                                   |
|                                      | I Examiner's Signature:<br>ecify reason):  |                                     |                                      |                                   |
| <b></b>                              |  |                                     |                                      |                                   |
|                                      | lards outlined in <u>49 CFR 391.41</u> , then comp   |                                     |                                      |                                   |
|                                      | n for certification. I have personally revie<br>v knowledge, I believe it to be true and c |                                     | corded information pe                | ertaining to this evaluation,     |
| Medical Examiner's Signature:        |  |                                     |                                      |                                   |
|                                      | e print or type):  |                                     |                                      |                                   |
|                                      |  |                                     |                                      |                                   |
|                                      |  |                                     |                                      |                                   |
| Medical Examiner's Telephone N       | lumber:  | Date Certificate Signe              | ed:                                  |                                   |
| Medical Examiner's State License     | e, Certificate, or Registration Number: $\_$   |                                     |                                      | lssuing State:                    |
| MD DO Physician A                    | Assistant 🗌 Chiropractor 🗌 Advanc  | ed Practice Nurse                   |                                      |                                   |
| Other Practitioner (specify):        |  |                                     |                                      |                                   |
| National Registry Number:            |  | Medical Examiner's                  | Certificate Expiration               | Date:                             |

| Form MCSA-5875  |                            |  | OMB No. 2126          | 5-0006 Expiration Date: 9/30/2019 |
|---|----------------------------|--|-----------------------|-----------------------------------|
| Last Name:  | First Name:                | DOB:                                   | Exam                  | Date:                             |
| MEDICAL EXAMINER DETERMINATION (Stat  | e)                         |  |                       |                                   |
| Use this section for examinations performed in a variances (which will only be valid for intrastate |                            | al Motor Carrier Safety Regulations (2 | 19 CFR 391.41-391.49  | ) with any applicable State       |
| O Does not meet standards in <u>49 CFR 391.41</u>   | with any applicable Stat   | te variances (specify reason):         |                       |                                   |
| ○ Meets standards in <u>49 CFR 391.41</u> with any  | applicable State variand   | ces                                    |                       |                                   |
| ○ Meets standards, but periodic monitoring  | required (specify reason): |  |                       |                                   |
| Driver qualified for:  3 months   |                            |  |                       |                                   |
| Wearing corrective lenses Wearing   |                            |  |                       |                                   |
| Accompanied by a Skill Performance Evalu  | ation (SPE) Certificate    | Grandfathered from State requ          | irements (State)      |                                   |
| If the driver meets the standards outlined in   | 49 CFR 391.41, with applic | able State variances, then complete a  | Medical Examiner's Ce | rtificate, as appropriate.        |
| I have performed this evaluation for certification and attest that to the best of my knowledge, I   |                            |  | rded information pe   | rtaining to this evaluation,      |
| Medical Examiner's Signature:   |                            |  |                       |                                   |
| Medical Examiner's Name (please print or type):   |                            |  |                       |                                   |
| Medical Examiner's Address:   |                            | City:                                  | State:                | Zip Code:                         |
| Medical Examiner's Telephone Number:  |                            | Date Certificate Signed                |                       |                                   |
| Medical Examiner's State License, Certificate, c  | r Registration Number:     |  |                       | Issuing State:                    |
| MD DO Physician Assistant   | Chiropractor 🗌 Advan       | ced Practice Nurse                     |                       |                                   |
| Other Practitioner (specify):   |                            |  |                       |                                   |
| National Registry Number:   |                            | Medical Examiner's Co                  | ertificate Expiration | Date:                             |

# **Instructions for Completing the Medical Examination Report Form (MCSA-5875)**

#### I. Step-By-Step Instructions

#### **Driver:**

.

#### Section 1: Driver information

- **Personal Information**: Please complete this section using your name as written on your driver's license, your current address and phone number, your date of birth, age, gender, driver's license number and issuing state.
  - CLP/CDL Applicant/Holder: Check "yes" if you are a commercial learner's permit (CLP) or commercial driver's license (CDL) holder, or are applying for a CLP or CDL. CDL means a license issued by a State or the District of Columbia which authorizes the individual to operate a class of a commercial motor vehicle (CMV). A CMV that requires a CDL is one that: (1) has a gross combination weight rating or gross combination weight of 26,001 pounds or more inclusive of a towed unit with a gross vehicle weight rating (GVWR) or gross vehicle weight (GVW) of more than 10,000 pounds; or (2) has a GVWR or GVW of 26,001 pounds or more; or (3) is designed to transport 16 or more passengers, including the driver; or (4) is used to transport either hazardous materials requiring hazardous materials placards on the vehicle or any quantity of a select agent or toxin.
  - **Driver ID Verified By**: The Medical Examiner/staff completes this item and notes the type of photo ID used to verify the driver's identity such as, commercial driver's license, driver's license, or passport, etc.
  - Question: Has your USDOT/FMCSA medical certificate ever been denied or issued for less than two years? Please check the correct box "yes" or "no" and if you aren't sure check the "not sure" box.
- Driver Health History:
  - **Have you ever had surgery:** Please check "yes" if you have ever had surgery and provide a written explanation of the details (type of surgery, date of surgery, etc.)
  - Are you currently taking medications (prescription, over-the-counter, herbal remedies, diet supplements): Please check "yes" if you are taking any diet supplements, herbal remedies, or prescription or over the counter medications. In the box below the question, indicate the name of the medication and the dosage.
  - **#1-32:** Please complete this section by checking the "yes" box to indicate that you have, or have ever had, the health condition listed or the "No" box if you have not. Check the "not sure" box if you are unsure.
  - **Other Health Conditions not described above**: If you have, or have had, any other health conditions not listed in the section above, check "Yes" and in the box provided and list those condition(s).
  - **Any yes answers to questions #1-32 above:** If you have answered "yes" to any of the questions in the Driver Health History section above, please explain your answers further in the box below the question. For example, if you answered "yes" to question #5 regarding heart disease, heart attack, bypass, or other heart problem, indicate which type of heart condition. If you checked "yes" to question #23 regarding cancer, indicate the type of cancer. Please add any information that will be helpful to the Medical Examiner.
- **CMV Driver Signature and Date:** Please read the certification statement, sign and date it, indicating that the information you provided in Section 1 is accurate and complete.

#### **Medical Examiner:**

#### **Section 2: Examination Report**

- **Driver Health History Review:** Review answers provided by the driver in the driver health history section and discuss any "yes" and "not sure" responses. In addition, be sure to compare the medication list to the health history responses ensuring that the medication list matches the medical conditions noted. Explore with the driver any answers that seem unclear. Record any information that the driver omitted. As the Medical Examiner conducting the driver's physical examination you are required to complete the entire medical examination even if you detect a medical condition that you consider disqualifying, such as deafness. Medical Examiners are expected to determine the driver's physical qualification for operating a commercial vehicle safely. Thus, if you find a disqualifying condition for which a driver may receive a Federal Motor Carrier Safety Administration medical exemption, please record that on the driver's Medical Examiner's Certificate, Form MCSA-5876, as well as on the Medical Examination Report Form, MCSA-5875.
- Testing:
  - Pulse rate and rhythm, height, and weight: record these as indicated on the form.
  - **Blood Pressure:** record the blood pressure (systolic and diastolic) of the driver being examined. A second reading is optional and should be recorded if found to be necessary.
  - Urinalysis: record the numerical readings for the specific gravity, protein, blood and sugar.
  - Vision: The current vision standard is provided on the form. When other than the Snellen chart is used, give test results in Snellen-comparable values. When recording distance vision, use 20 feet as normal. Record the vision acuity results and indicate if the driver can recognize and distinguish among traffic control signals and devices showing red, green, and amber colors; has monocular vision; has been referred to an ophthalmologist or optometrist; and if documentation has been received from an ophthalmologist or optometrist.
  - **Hearing:** The current hearing standard is provided on the form. Hearing can be tested using either a whisper test or audiometric test. Record the test results in the corresponding section for the test used.
- **Physical Examination:** Check the body systems for abnormalities and indicate normal or abnormal for each body system listed. Discuss any abnormal answers in detail in the space provided and indicate whether it would affect the driver's ability to safely operate a commercial motor vehicle.

#### In this next section, you will be completing either the Federal or State determination, not both.

- Medical Examiner Determination (Federal): Use this section for examinations performed in accordance with the FMCSRs (<u>49 CFR 391.41-391.49</u>). Complete the medical examiner determination section completely. When determining a driver's physical qualification, please note that English language proficiency (<u>49 CFR part 391.11</u>: General qualifications of drivers) is not factored into that determination.
  - **Does not meet standards:** Select this option when a driver is determined to be not qualified and provide an explanation of why the driver does not meet the standards in 49 CFR 391.41.
  - Meets standards in 49 CFR 391.41; qualifies for 2-year certification: Select this option when a driver is determined to be qualified and will be issued a 2-year Medical Examiner's Certificate.

- **Meets standards, but periodic monitoring is required:** Select this option when a driver is determined to be qualified but needs periodic monitoring and provide an explanation of why periodic monitoring is required. Select the corresponding time frame that the driver is qualified and if selecting other, specify the time frame.
  - **Determination that driver meets standards:** Select all categories that apply to the driver's certification (e.g., wearing corrective lenses, accompanied by a waiver/exemption, driving within an exempt intracity zone, etc.).
- **Determination pending:** Select this option when more information is needed to make a qualification decision and specify a date, on or before the 45 day expiration date, for the driver to return to the medical exam office for follow-up. This will allow for a delay of the qualification decision for as many as 45 days. If the disposition of the pending examination is not updated via the National Registry on or before the 45 day expiration date, FMCSA will notify the examining medical examiner and the driver in writing that the examination is no longer valid and that the driver is required to be re-examined.
  - MER amended: A Medical Examination Report Form (MER), MCSA-5875, may only be amended while in determination pending status for situations where new information (e.g., test results, etc.) has been received or there has been a change in the driver's medical status since the initial examination, but prior to a final qualification determination. Select this option when a Medical Examination Report Form, MCSA-5875, is being amended; provide the reason for the amendment, sign and date. In addition, initial and date any changes made on the Medical Examination Report Form, MCSA-5875. A Medical Examination Report Form, MCSA-5875, cannot be amended after an examination has been in determination pending status for more than 45 days or after a final qualification determination Report Form, MCSA-5875, should be completed.
- **Incomplete examination:** Select this when the physical examination is not completed for any reason (e.g., driver decides they do not want to continue with the examination and leaves) other than situations outlined under determination pending.
- **Medical Examiner information, signature and date:** Provide your name, address, phone number, occupation, license, certificate, or registration number and issuing state, national registry number, signature and date.
- **Medical Examiner's Certificate Expiration Date**: Enter the date the **driver's** Medical Examiner's Certificate (MEC) expires.
- **Medical Examiner Determination (State):** Use this section for examinations performed in accordance with the FMCSRs (<u>49 CFR 391.41-391.49</u>) with any applicable State variances (which will only be valid for intrastate operations). Complete the medical examiner determination section completely.
  - **Does not meet standards in 49 CFR 391.41 with any applicable State variances:** Select this option when a driver is determined to be not qualified and provide an explanation of why the driver does not meet the standards in 49 CFR 391.41 with any applicable State variances.
  - Meets standards in 49 CFR 391.41 with any applicable State variances: Select this option when a driver is determined to be qualified and will be issued a 2-year Medical Examiner's Certificate.
  - **Meets standards, but periodic monitoring is required:** Select this option when a driver is determined to be qualified but needs periodic monitoring and provide an explanation of why periodic monitoring is required. Select the corresponding time frame that the driver is qualified and if selecting other, specify the time frame.
- Determination that driver meets standards: Select all categories that apply to the driver's certification (e.g., wearing corrective lenses, accompanied by a waiver/exemption, etc.).
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- **Medical Examiner information, signature and date:** Provide your name, address, phone number, occupation, license, certificate, or registration number and issuing state, national registry number, signature and date.
- **Medical Examiner's Certificate Expiration Date**: Enter the date the **driver's** Medical Examiner's Certificate (MEC) expires.
- II. If updating an existing exam, you must resubmit the new exam results, via the Medical Examination Results Form, MCSA-5850, to the National Registry, and the most recent dated exam will take precedence.
- III. To obtain additional information regarding this form go to the Medical Program's page on the Federal Motor Carrier Safety Administration's website at <a href="http://www.fmcsa.dot.gov/regulations/medical">http://www.fmcsa.dot.gov/regulations/medical</a>.



Texas Highway Patrol Division Commercial Vehicle Enforcement

# Part 392 - Driving of Motor Vehicles

## Illness or Fatigue (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 (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 (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. A driver is forbidden to have any measured alcohol concentration or detected presence of alcohol, while on duty, or operating, or in physical control of a commercial motor vehicle.

## Safe Loading (392.9)

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

## Railroad Crossing/Stopping (392.10 & 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. Other CMVs must slow down.

## Seat Belts (392.16)

Drivers - A CMV which has a seat belt assembly installed at the driver's seat shall not be driven unless the driver has properly restrained himself/herself with the seat belt assembly.

Passengers – No driver shall operate or motor carrier allow or permit a driver to operate a property carrying commercial motor vehicle, that has seat belt assemblies installed at the seats for other occupants of the vehicle unless all other occupants are properly restrained by such seat belt assemblies. Passengers on a bus are not required.

## **Emergency Signals For Stopped Vehicles (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.

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 ten feet, in the direction of approaching traffic.
- 2. A second device must be placed facing approaching traffic approximately 100 feet away in the

#### A Texas Motor Carrier's Guide to Highway Safety

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 (392.71)

The possession or use of radar detectors is prohibited.

## **Registration and Operating Authority (392.9a)**

Three concepts are easily and frequently confused:

- Vehicle Registration
- Motor Carrier Registration
- Motor Carrier Operating Authority

#### Vehicle Registration

In order to be operated on public highways, all motor vehicles, including trailers, must be registered annually and pay the applicable road usage taxes. Generally, the owner must register the vehicle in the jurisdiction where the owner resides or has its principal place of business, or in the jurisdiction where the vehicle is primarily used (TRC 502.002 and 502.0079). This registration involves issuance of license plates and title certificates. Recently, the state and federal government have begun requiring that registering commercial motor vehicles will require obtaining and furnishing a USDOT Number (see Motor Carrier Registration).

#### Motor Carrier Registration – Interstate

Motor carriers and others must register with the United States Department of Transportation, Federal Motor Carrier Safety Administration, and obtain a USDOT number under many circumstances. It is necessary that a USDOT number be obtained even if you are not a motor carrier, but you own a commercial motor vehicle or an intermodal container that is transported by others. It has also become necessary in many states, including Texas, to obtain a USDOT number before operating intrastate. A USDOT number request/application can be obtained online for a fee. A \$300 registration fee will be required for a private and exempt for-hire motor carriers, cargo tank facilities, and intermodal equipment providers (IEPs). The fee schedule can be found in the Federal Motor Carrier Safety Regulations under Part 360.3(f). The MCS-150 will be replaced by the Form MCSA-1. Regulations for starting the application process can be found under Part 365.105.

Form MCSA-1 is available at http://www.fmcsa.dot.gov/urs.

## Motor Carrier Operating Authority – Interstate

The FMCSA will use the USDOT number as a unique identifier for motor carriers, brokers and freight forwarders subject to its regulations. The Unified Registration System (URS) will discontinue the issuance of MC, MX, and FF numbers. MAP-21 amended 49 U.S.C. 13901 to require distinctive USDOT numbers for each type of authority issued. For example, an entity applying for both broker and motor carrier authority will receive a different USDOT number for each type of authority. This provision also requires that the USDOT number include an "indicator" of the type of authority issued. The FMCSA will stipulate the requirement in a separate rulemaking policy. To get additional information on URS, go to <u>https://www.fmcsa.dot.gov/registration/unified-registration-system</u>.

#### Motor Carrier Registration – Intrastate

Any person or entity who directs the operation of certain types of commercial motor vehicles intrastate in Texas must register and obtain a state number. Registration is with the Texas Department of Motor Vehicles (TXDMV), and the state number is called a TXDMV number.

The following types of operations are exempt under TRC 643.002 from intrastate motor carrier registration:

- motor carrier operations exempt from registration by the Unified Carrier Registration Act of 2005 (49 U.S.C. Section 14504a) or a motor vehicle registered under the single state registration system established under 49 U.S.C. Section 14504(c) when operating exclusively in interstate or international commerce;
- (2) a motor vehicle registered as a cotton vehicle under Section 504.505;
- (3) a motor vehicle the department by rule exempts because the vehicle is subject to comparable registration and a comparable safety program administered by another governmental entity;
- (4) a motor vehicle used to transport passengers operated by an entity whose primary function is not the transportation of passengers, such as a vehicle operated by a hotel, day-care center, public or private school, nursing home, or similar organization;
- (5) a vehicle operating under a private carrier permit issued under Chapter 42, Alcoholic Beverage Code;
- (6) a vehicle operated by a governmental entity; or
- (7) a tow truck, as defined by Section 2308.002, Occupations Code.

#### Motor Carrier Operating Authority – Intrastate

In addition to registering with TXDMV, certain types of commercial motor vehicle operations must obtain operating authority. The motor carrier must pay registration fees and provide TXDMV with proof of insurance (normally the insurance company will contact TXDMV directly with proof of insurance).

Under federal law, you may be exempted from renewing your intrastate operating authority if you participate in the Unified Carrier Registration program (UCR, see below), but this does not exempt you from the initial registration. If you do not participate in UCR, you must renew your intrastate operating authority periodically.

Beginning in September 2009, state law required a USDOT number to apply for, renew or reinstate intrastate operating authority. If you are not conducting any interstate commerce, you should apply as "intrastate only" in order to be classified and have your compliance history evaluated properly.

#### Who should register for Intrastate Operating Authority?

Transportation Code, Chapter 643, provides that a motor carrier may not operate a CMV as defined by Sec 548.001, or transport household goods in a vehicle regardless of the size for compensation, on a road or highway of this state without first registering their operations with the Texas Department of Motor Vehicles (TXDMV), Motor Carrier Division at www.txdmv.gov or 1-888-368-4689.

All for-hire transporters of household goods are required to register their operations with Texas Department of Motor Vehicles (TXDMV), Motor Carrier Division, regardless of the size of equipment such carriers operate. Household goods carriers have different requirements than other types of motor carriers.

Application forms can be found on the TXDMV website at: http://www.txdmv.gov/forms-carriers/

#### What is a motor carrier?

Interstate definition for insurance purposes (387.5) Motor carrier means a for-hire motor carrier or a private motor carrier. The term includes, but is not limited to, a motor carrier's agent, officer, or representative; an employee responsible for hiring, supervising, training, assigning, or dispatching a driver; or an employee concerned with the installation, inspection, and maintenance of motor vehicle equipment and/or accessories.

Texas definition for registration and insurance purposes (TRC 643.001(6)) "Motor carrier" means an individual, association, corporation, or other legal entity that controls, operates, or directs the operation of one or more vehicles that transport persons or cargo over a road or highway in this state.

In Texas, a CMV includes:

- any motor vehicle or combination of vehicles with a gross weight or gross weight rating in excess of 26,000 pounds, which is designed or used for the transportation of cargo in furtherance of any commercial enterprise
- all tow trucks (a tow truck is a motor vehicle including a wrecker equipped with a mechanical device, or used in combination with a mechanical device used to tow, winch, or otherwise move another vehicle), regardless of the gross weight rating of the tow truck
- > any vehicle, including buses, designed to transport more than 15 passengers, including the driver
- any vehicle used in the transportation of hazardous materials in a quantity requiring placards under the regulations issued under the Federal Hazardous Materials Transportation Act (Title 49, United States Code, App. §§1801-1813); and
- a CMV, as defined by 49 C.F.R. §390.5, that is owned or controlled by a person or entity that is domiciled in or a citizen of a country other than the United States.

For motor carrier registration purposes, a CMV **DOES NOT** include:

- a farm vehicle, as defined by 43 TAC, Section 18.2, with a gross weight, and gross weight rating of less than 48,000 pounds
- > cotton vehicles registered in accordance with Transportation Code, §502.277
- a vehicle registered with the Texas Railroad Commission pursuant to Texas Natural Resources Code, §113.131 and §116.072
- ➤ a vehicle transporting liquor under a private carrier permit issued in accordance with the Texas Alcoholic Beverage Code, Chapter 42
- a motor vehicle used to transport passengers operated by an entity whose primary function is not the transportation of passengers, such as a vehicle operated by a hotel, day-care center, public or private school, nursing home, or similar organization
- a motor vehicle operating exclusively in interstate or international commerce and registered under the Unified Carrier Registration (UCR) system
- > a vehicle operated by a government entity.
- > a tow truck as defined by section 2308.002, Occupations Code.

# **Unified Carrier Registration**

Interstate motor carriers, whether for-hire or private, are now required to obtain Unified Carrier Registration in order to have authority to operate interstate. Interstate motor carriers who also conduct intrastate motor carrier operations in Texas will be required to comply with the initial TXDMV registration and operating authority requirements. However, if they maintain good standing with USDOT and UCR, they no longer need to renew TXDMV registration and operating authority – UCR will, in those circumstances, automatically grant intrastate operating authority in Texas.

## Intrastate Operating Authority Out-of-Service Review (37 TAC 4.18)

A motor carrier may request a review of the out-of-service order within 10 days of the issuance of the out-of-service order. A request for a review does not stay the out-of-service order.

A request for an out-of-service review must be made in writing and forwarded to the manager of the Department's Motor Carrier Bureau. A request for review must contain a concise statement of the issues to be contested at the review. If requested, a review will be scheduled and conducted by the manager of the Motor Carrier Bureau or the director's designee within 10 days of the issuance of the out-of-service order. A request for review should be addressed to the Texas Department of Public

Safety, Motor Carrier Bureau, P.O. Box 4087, Austin, Texas 78773-0521 or may be sent by facsimile transmission to 512-424-5712 or via electronic mail at: MotorCarrierBureau@dps.texas.gov. The Department may conduct the review by telephone conference call.

## Administrative Action by TXDMV (37 TAC 4.19)

The director or the director's designee will determine whether the Department will request that TXDMV revoke a registration it has issued based upon the Department's compliance review or safety audit. The director or the director's designee will determine whether the Department will request that TXDMV take administrative action against a carrier required to register with TXDMV under Chapter 643 of the Texas Transportation Code.

This determination may be based upon the following:

- > an unsatisfactory safety rating under Title 49, Code of Federal Regulations, Part 385;
- multiple violations of Texas Transportation Code, Chapter 644, a rule adopted under Texas Transportation Code, Chapter 644, or Texas Transportation Code, Subtitle C (Relating to Rules of the Road), and/or
- failure to properly register as a motor carrier with TXDMV as required in Texas Transportation Code §643.

Once the determination has been made the director or the director's designee will forward a letter to the executive director of TXDMV requesting administrative action against the motor carrier.

Any administrative action initiated by TXDMV pursuant to this section shall be administered in the manner specified by TXDMV rules.

## New Entrant Background Information (Part 385, Subpart D, Sections 385.301 - 385.337)

Although this does deal with authority to operate a commercial motor vehicle, the rules are located in Part 385. Therefore, please refer to that Part for more information about this program.



# Instructions for Texas Intrastate Operating Authority Application

Incomplete applications will NOT be processed.

#### **Definitions:**

AN = Assumed Name DBA = Doing Business As DL# = Driver License Number FEIN = Federal Employer Identification Number ID# = State-issued Identification Certificate Number IRP = International Registration Plan LTC# = License to Carry

MCCS = Motor Carrier Credentialing System MCD = Motor Carrier Division SSN = Social Security Number TX Tax# = Texas Comptroller's Taxpayer Number UCR = Unified Carrier Registration USDOT# = United States Department of Transportation Number

#### Section 1:

- A. Name of applicant (and DBA, if applicable) applying for Texas Intrastate Passenger Carrier Operating Authority;
- B. Physical address and mailing address;
- C. Business and cell numbers, and applicant's email address (Email address must belong to the business.);
- D. Applicant's Business Type: (Proof of identification required.)

AN Certificate - Supporting documents, such as an AN filing in county of operation, must be submitted with application.

- Sole Proprietor Required Information: SSN
  - 1. You **must** provide one of the following forms of identification:
    - a. Valid DL# issued by a state or territory of the United States.
    - b. Valid ID# issued by a state or territory of the United States; or
    - c. Valid LTC# issued by the Texas Department of Public Safety under Government Code, Chapter 411, Subchapter H.
  - 2. AN Certificate Supporting documents, such as an AN filing in county of operation, must be submitted with application.

<u>Corporation, Limited Liability Company, Limited Partnership, or Professional Association</u> - Required Information: TX Tax# and/or FEIN; General Partnership - Required Information: FEIN;

- E. List active company officers by name and title;
- F. Provide the requested information regarding a drug testing consortium; and
- G. Enter your USDOT# and indicate if you are registered under UCR. If you are UCR registered, then your certificate may be converted to a non-expiring UCR Intrastate certificate. If converted, the certificate will not expire while the carrier maintains UCR registration, maintains required proof of insurance <u>and</u> does not operate as an intrastate Household Goods Carrier, Non Charter Bus Carrier, Waste Hauler or Recyclable Materials Carrier.

#### Section 2:

- A. Mark the required insurance amount(s) for your type of operation(s). Contact your insurance company to request submission of the appropriate filings through MCCS. **Note**: Once a motor carrier is registered, the failure to maintain proof of insurance on file with TxDMV may subject the motor carrier to administrative penalties and/or sanctions, up to and including revocation of the certificate; and
- B. If you are a Texas-domiciled motor carrier that has an agent other than itself or if you are a motor carrier domiciled outside of Texas, you must provide the name, Texas physical address (P.O. Box cannot be used), and phone number of the legal agent for service of process. The agent must be a Texas resident, a domestic corporation, or a foreign corporation authorized to transact business in Texas.

#### Section 3:

- A. Indicate your method of payment.
- B. Calculate all applicable fees:
  - 1. \$100 for application filing fee;
  - 2. \$100 liability insurance filing fee; and
  - 3. Total Vehicle Fees (calculated from Equipment List page).

Checks, cashier's checks or money orders must be made payable to TxDMV. If paying by credit card, print the credit card number and expiration date. \*A service charge of 25 cents plus 2.25 percent of the Total Fees will be added to all credit card transactions.

#### Section 4:

Complete the New Applicant Questionnaire by answering all questions and signing/printing your name and title. Must be signed by the applicant or other legal representative. Insurance agents may not complete this form.

#### Section 5:

Complete the Equipment Report in its entirety:

- 1. Provide all motor carrier information;
- 2. Provide all vehicle information;
- 3. Indicate motor carrier type; and

4. Confirm total fees. (Total fees are reflected in Section 3.)



# **Application for Texas Intrastate Operating Authority**

Texas Department of Motor Vehicles Attn: MCD - Credentialing Section 4000 Jackson Ave., Austin, TX 78731 Phone: 1-800-299-1700

| Section 1  |                                  |  |                                 |
|--|----------------------------------|--|---------------------------------|
| Name of Applicant  |                                  | Assumed Name (DBA)                                 |                                 |
| Street/Physical Address  | City                             | State  | Zip                             |
| Street/Mailing Address   | City                             | State  | Zip                             |
| Business Phone   |                                  | Cell Phone   |                                 |
| Primary Email Address  |                                  | Alternate Email Address                            |                                 |
| Applicant is a(n):   |                                  |  |                                 |
| Sole Proprietor* SSN*  | DL#*                             | Other (LTC# or ID#)                                |                                 |
| Corporation Partnership Ge   | neral Partnership                | Limited Liability Corporation                      |                                 |
| Limited Partnership Profession   | al Association                   |  |                                 |
| Texas Tax# ( <u>Required</u> for all <i>but</i> Sole Proprietor, Partner | ship and General Partnership)    | FEIN ( <u>Required</u> for all <i>but</i> Sole Pro | prietor)                        |
| *Required to register as a sole proprietor. (See top of ins              | structions page for definitions. | )  |                                 |
| Company Owner, Partners, Corporation Officers or Mem                     | bers (If additional space is nee | ded, attach a separate sheet of information        | to application.)                |
| Name and Title   |                                  | Name and Title                                     |                                 |
| Name and Title   |                                  | Name and Title                                     |                                 |
| Does this carrier belong to a drug-testing consortium?                   |                                  |  |                                 |
| Yes* No *If yes, please prov   | vide the name of the person(s)   | operating consortium.                              |                                 |
| USDOT#   | Are yo                           | u registered under UCR?                            |                                 |
|  |                                  | Yes*   | ] No                            |
| Section 2  |                                  |  |                                 |
| Motor Carrier Operations (More than one type m                           | ay be checked)                   | Insurance Requirements (Refer                      | to Insurance Requirements page) |
| <b>1</b> . Hazardous Materials (HAZ)                                     |                                  | \$1,000,000  | \$5,000,000                     |
| <b>2.</b> Farm Trucks  |                                  | \$500,000  |                                 |
| <b>3.</b> Other  |                                  | \$500,000  |                                 |
| Legal Agent's Name   |                                  | Phone Number                                       |                                 |
| Street/Physical Address  | City                             | State  | Zip                             |
| I understand that providing false information on                         | this form may result in su       | spension, revocation or denial of the c            | ertificate I am requesting.     |

By signing and submitting this application, I certify that the information provided on this form is true and correct, that I am authorized to execute and file this document on behalf of the motor carrier, and that the motor carrier: (1) is in compliance with the drug testing requirements contained in 49 C.F.R. Part 382; (2) has knowledge of, and will conduct operations in accordance with, applicable federal and state laws and rules relating to motor carrier safety, including Tex. Trans. Code, Chapters 541-600, 643, and 644; and (3) has the required insurance as set forth in 43 Tex. Admin. Code, §218.16.

Signature of Owner, Partner, Corporate Officer of Member

Print/Type Name

Print/Type Title



# Texas Intrastate Operating Authority Payment Information

#### Section 3

| Payment Information:   |   |  |  |
|--|---|--|--|
| Check, Cashier's Check or Money Order (make payable to TxDMV/MCD)  |   |  | \$100.00   |
| MasterCard, Visa, Discover, or American Express*   |   |  | \$100.00   |
| *A service charge of 25 cents plus 2.25 percent of the Total Fees will be added to all credit card transactions. |   |  |  |
| · ···· · · · · · · · · · · · · · · · ·   |   |  | \$200.00   |
|  | American Express*<br>ercent of the Total Fees will be added to all<br>transactions. | ey Order (make payable to TxDMV/MCD) a) \$100<br>American Express* b) \$100<br>b) \$100<br>c) Total V<br>(bottom of<br>Expiration Date: d) Total F | American Express*       b) \$100       Liability Insurance Filing Fee         ercent of the Total Fees will be added to all<br>transactions.       c) Total Vehicle Fees<br>(bottom of page 3, Equipment Report) |

#### I authorize the Texas Department of Motor Vehicles to charge the credit card indicated above in this application form.

By signing and submitting this application, I certify that I am an authorized user of this credit card. This payment authorization is for intrastate motor carrier registration, for the amount indicated above only, and is valid for one time use only.

Signature of Authorized User

Print/Type Name

**NOTE:** The Texas Department of Motor Vehicles will notify you of any deficiencies associated with your application. **Mail application and payment to:** Attn: MCD-Credentialing Section, 4000 Jackson Ave., Austin TX 78731.



# New Applicant Questionnaire for Texas Intrastate Operating Authority

For this form, "you" means the applicant, or any business that is operated, managed or otherwise controlled or affiliated with the applicant, the applicant's relatives, family members, corporate officers or shareholders of the applicant.

| Section 4                       |                              |  |  |   |   |
|---------------------------------|------------------------------|--|--|---|---|
| 1) Have you                     | ever had a                   | nother motor carrier certifica   | te number (*TxDMV                                    | ) registered with                       | n this agency?  |
|                                 |                              | ment authority has been transfer<br>the term TxDMV# also includes      |  |   | portation to the Texas Department of Motor Vehicles   |
| 🗌 Yes                           | 🗌 No                         | If Yes, provide the TxDMV#   |  | If Yes, provide th                      | e TxDMV#  |
|                                 |                              | If Yes, provide the TxDMV#   |  | If Yes, provide th                      | e TxDMV#  |
| 2) Have you<br>Unsatisfacto     |                              | -  | ant Audit by the Tex                                 | as Department                           | of Public Safety (TxDPS) that resulted in an  |
| 🗌 Yes                           | 🗌 No                         | If Yes, provide USDOT#   |  | AND TxDMV#                              |   |
| 3) Are you c                    | urrently un                  | der a Cease and Desist order   | from TxDPS?  |   |   |
| 🗌 Yes                           | 🗌 No                         | If Yes, provide USDOT#   |  | AND Carrier Pro                         | file# (CP#)   |
|                                 |                              | nother motor carrier? (The rel<br>as operated as a motor carrie        |  | rough a person,                         | family member, corporate officer or partner   |
| 🗌 Yes                           | 🗌 No                         | If Yes, provide the information  | on below.  |   |   |
| Motor Carrie                    | r's name                     |  | Their USDOT  | "# <u>or</u> TxDMV#                     | How are you related?  |
| Motor Carrie                    | r's name                     |  | Their USDOT  | # <u>or</u> TxDMV#                      | How are you related?  |
| 5) Do you cu                    | urrently ow                  | e any administrative penalties   | s to TxDMV?  |   |   |
| 🗌 Yes                           | 🗌 No                         | If Yes, provide the informati  | on below under whi                                   | ch the penalties                        | are associated.   |
|                                 |                              | Notice #   | USDOT#   |   | TxDMV#  |
| 6) Is the per                   | son comple                   | ting this form an authorized r   | representative of the                                | e applicant?                            |   |
| 🗌 Yes                           | 🗌 No                         | If Yes, provide the informati  | on below.  |   |   |
| Printed Name                    | e                            |  |  | Job Title                               |   |
| Company Na                      | me                           |  |  | Phone Number                            |   |
| I understand                    | l that providi               | ng false information on this form                                      | ו may result in suspens                              | sion, revocation o                      | r denial of the certificate I am requesting.  |
| file this docu<br>49 C.F.R. Par | ment on ben<br>t 382; (2) ha | alf of the motor carrier, and that<br>s knowledge of, and will conduct | the motor carrier: (1) is operations in accordations | s in compliance winn nce with, applicab | tue and correct, that I am authorized to execute and<br>th the drug testing requirements contained in<br>le federal and state laws and rules relating to motor<br>ired insurance as set forth in 43 Tex. Admin. Code, |
| Signature of O                  | wner, Partner,               | Corporate Officer of Member  |  |   |   |
| Print/Type Nar                  | ne                           |  | Print  | /Type Title                             |   |



# Equipment Report for Texas Intrastate Operating Authority

| Section 5   |   |                               |   | -   |                  |            |           |  |
|---|---|-------------------------------|---|---|------------------|------------|-----------|--|
| INSTRUCTIONS  | <ul> <li>Type or print l</li> <li>Enter required</li> </ul> | egibly in blu<br>d informatio | ie or black ink.<br>n for all vehicles. | <ul> <li>Do not list trailers.</li> <li>If additional space is needed, pressure is needed.</li> </ul> | please make a co | opy of thi | s page.   |  |
| Name of Applicant   |   |                               | DBA                                     |   |                  |            |           |  |
| Street/Physical Address   |   |                               | City                                    | State   | Zip              |            |           |  |
| Type of Motor Ca  | arrier - More   | than one                      | carrier type may be selected.           | Other   | HAZ = H          | Hazardo    | us        |  |
| Vehicle<br>Make   | Unit<br>Number  | Year of<br>Vehicle            | COMPLETE Vehicle                        | Identification Number (VIN)   | M                | lotor Car  | rier Type |  |
| 1.  | Number  | Venicie                       |   |   |                  | Other      |           |  |
| 2.  |   |                               |   |   |                  |            |           |  |
| 3.  |   |                               |   |   |                  |            |           |  |
| 4.  |   |                               |   |   |                  |            |           |  |
| 5.  |   |                               |   |   |                  |            |           |  |
| 6.  |   |                               |   |   |                  |            |           |  |
| 7.  |   |                               |   |   |                  |            |           |  |
| 8.  |   |                               |   |   |                  |            |           |  |
| 9.  |   |                               |   |   |                  |            |           |  |
| 10.   |   |                               |   |   |                  |            |           |  |
| 11.   |   |                               |   |   |                  |            |           |  |
| 12.   |   |                               |   |   |                  |            |           |  |
| 13.   |   |                               |   |   |                  |            |           |  |
| 14.   |   |                               |   |   |                  |            |           |  |
| 15.   |   |                               |   |   |                  |            |           |  |
| 16.   |   |                               |   |   |                  |            |           |  |
| 17.   |   |                               |   |   |                  |            |           |  |
| 18.   |   |                               |   |   |                  |            |           |  |
| 19.   |   |                               |   |   |                  |            |           |  |
| 20.   |   |                               |   |   |                  |            |           |  |
| Total Number of Vehicles:       0          Registration Options:  |   |                               |   |   |                  |            |           |  |
|   |   |                               | = Vehicle Cost: \$ \$0.00               | = Vehicle (   | Cost: \$ \$0.00  |            |           |  |
| I understand that providing false information on this form may result in suspension, revocation or denial of the certificate I am requesting.<br>By signing and submitting this application, I certify that the information provided on this form is true and correct, that I am authorized to execute and file this document on behalf of the motor carrier, and that the motor carrier: (1) is in compliance with the drug testing requirements contained in 49 C.<br>F.R. Part 382; (2) has knowledge of, and will conduct operations in accordance with, applicable federal and state laws and rules relating to motor carrier safety, including Tex. Trans. Code, Chapters 541-600, 643, and 644; and (3) has the required insurance as set forth in 43 Tex. Admin. Code, §218.16.<br>Signature of Owner, Partner, Corporate Officer of Member |   |                               |   |   |                  |            |           |  |
| Print/Type Name   |   |                               | Print/Typ                               | pe Title  |                  |            |           |  |



# Insurance Requirements for Texas Intrastate Operating Authority

#### <u>All</u> insurance filings must be submitted electronically on a <u>Form E</u> by your insurance company.

| Type of Motor<br>Carrier Operation | Description   | Minimum Insurance<br>Requirement |
|------------------------------------|---|----------------------------------|
| 1 = HAZ                            | Transporters of Hazardous Substances  |                                  |
|                                    | <ol> <li>Oil listed in 49 C.F.R. §172.101: hazardous waste, hazardous materials and hazardous<br/>substances as defined in 49 C.F.R. §171.8 and listed in 49 C.F.R. §172.101, but not<br/>mentioned in paragraphs (2) or (3) of this section.</li> </ol>  | \$1,000,000                      |
|                                    | 2) Commercial motor vehicles with a gross vehicle weight rating of 10,001 or more pounds - Hazardous substances, as defined in 49 C.F.R. §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 material, 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 C.F. R. §173.403. | \$5,000,000                      |
|                                    | 3) Commercial motor vehicles with a gross vehicle weight rating of less than 10,001 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 C.F.R. §173.403.  | \$5,000,000                      |
| 2 = Farm Trucks                    | Farm Trucks   |                                  |
|                                    | <ol> <li>Farm Trucks (gross vehicle weight, registered weight, or gross weight rating of 48,000<br/>pounds or more).</li> </ol>   | \$500,000                        |
| 3 = Other                          | Other   |                                  |
|                                    | <ol> <li>Private or for-hire motor carrier with a commercial motor vehicle with a gross vehicle<br/>weight, registered weight or gross weight rating in excess of 26,000 pounds.</li> </ol>   | \$500,000                        |

For more information on the Texas Intrastate Operating Authority Application visit our website at www.TxDMV.gov. For questions concerning the application process contact MCD by phone at 800-299-1700, options 3-4-4, or email MCD\_MCCS-Helpdesk@txdmv.gov.

The Texas Department of Motor Vehicles maintains the information collected on this form. With a few exceptions, you are entitled upon request to be informed about the information that we collect about you. Under §§552.021, 552.023, and 559.004 of the Texas Government Code, you are entitled to receive and review this information, and to have us correct erroneous information.



Texas Highway Patrol Division Commercial Vehicle Enforcement

# Part 393 - Parts and Accessories Necessary for Safe Operation

Every CMV 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 (Part 393, Subpart B, Sections 393.9 – 393.26)

All lamps and reflectors for CMVs manufactured after December 25, 1968 must meet the requirements of Federal Motor Vehicle Safety Standard (FMVSS) No.108 (49 CFR 571.108) in effect on the date of manufacture. Certain trailers manufactured on or after December 1, 1993, must have retro-reflective sheeting or additional reflex reflectors to make them more visible to other motorists at nighttime and under other conditions of reduced visibility. Trailers manufactured before December 1, 1993 must be retrofitted with retro-reflective sheeting or additional reflex reflectors by June 1, 2001.

Lamps and reflectors on CMVs manufactured on or prior to March 7, 1989 must meet either the requirements of Part 393 or of FMVSS No.108 that were in effect on the date of manufacture.

## Must be Operable, Unobstructed (393.9)

All required lamps must light on request at an inspection and must light when required during regular operation of the vehicle. Auxiliary lamps that are not required need not be operable.

Lamps and reflective materials must not be obscured by the tailboard, or by any part of the load, or its covering by dirt, or other added vehicle or work equipment, or otherwise. Except conspicuity treatments (reflective material used for making you conspicuous or obviously visible to other motorists) at the front end of a vehicle may be obscured by part of a load being transported.

## Lamp Mounting (393.25)

All lamps must be permanently and securely mounted on a permanent part of the vehicle. The exceptions are temporary lamps, such as those used in a drive-away/tow-away operation or mounted on projecting loads. Temporary lamps must be securely attached.

## Stop Lamps (393.25)

All stop lamps on a CMV must activate when the service brakes are applied.

## Brakes (Part 393, Subpart C, Sections 393.40 – 393.55)

## **Required Brake Systems (393.40)**

Each commercial motor vehicle must have brakes adequate to stop and hold the vehicle or combination of motor vehicles. Each commercial motor vehicle must meet the applicable service, parking, and emergency brake system requirements provided in this section.

CMVs must be equipped with the following brake systems:

- > A service brake system that meets the requirements of Section 393.52.
- > A parking brake system that meets the requirements of Section 393.41.

An emergency brake system that conforms to the requirements of Section 393.52 and consists of either (1) emergency features of the service brake system or (2) a system separate from the service brake system.

NOTE: Older vehicles need to meet additional requirements. See the regulation for details.

## Brakes On All Wheels (393.42)

Every CMV must be equipped with brakes acting on all wheels, with the following exceptions:

- Trucks and truck tractors with three or more axles, manufactured before July 25, 1980, are not required to have steering axle brakes.
- Vehicles being towed in a drive-away/tow-away operation. (However, the towed vehicle must have brakes in operation if the brakes on the towing vehicle are not capable of stopping the combination vehicle under the conditions covered by Section 393.52.),
- Any full trailer, semi-trailer, or pole trailer having a gross weight of 3,000 pounds or less, provided the trailer weight does not exceed 40 percent of weight of the towing vehicle.
- > Brakes are not required on the steering axle of a three-axle dolly steered by a co-driver.
- Loaded house moving dollies, specialized trailers and dollies used to transport industrial furnaces, reactors and similar motor vehicles are not required to be equipped with brakes, provided they travel at 20 mph or less, and can stop within 40 feet at the speed they are actually traveling.

# Texas Exception: (TAC Title 37, Part 1, Chapter 4, Subchapter B, Rule §4.12).

Texas Transportation Code, §547.401 and §547.404, concerning brakes on trailers weighing 15,000 pounds gross weight or less take precedence over the brake requirements in the federal regulations for trailers of this gross weight specification unless the vehicle is required to meet the requirements of Federal Motor Vehicle Safety Standard No. 121 (Title 49, Code of Federal Regulations 571.121) applicable to the vehicle at the time it was manufactured.

## Brakes on Trailers – (TRC 547.401)

- Except as provided by Subsection (b), a motor vehicle, trailer, semitrailer, pole trailer, or combination of those vehicles shall be equipped with brakes that comply with this chapter.
- > A trailer, semitrailer, or pole trailer is not required to have brakes if:
  - its gross weight is 4,500 pounds or less; or
  - its gross weight is heavier than 4,500 pounds but not heavier than 15,000 pounds, and it is drawn at a speed of not more than 30 miles per hour.

## Breakaway and Emergency Braking (393.43)

Every vehicle used to tow a trailer equipped with brakes must have a means of maintaining the operation of the brakes on the towing vehicle in the event that the trailer breaks away from the towing vehicle. Among the other requirements:

- Every truck or truck tractor equipped with air brakes, when used to tow other vehicles equipped with air brakes, must be capable of activating (manually and automatically) the emergency features of the trailer brakes. The brakes must apply automatically when the towing vehicle air supply pressure is between 20 and 45 psi. The manual control must be operable by the driver from the driver's seat, with seat belt in use.
- Every trailer is required to be equipped with brakes that apply automatically if the trailer breaks away from the towing vehicle\*. The brakes must remain in the applied position for at least 15 minutes.

\*These requirements do not apply to vehicles in drive-away/tow-away operations.

# Brake Tubing and Hose (393.45)

Safe and reliable operation of a vehicle's brakes depends upon adequate protection of the tubing and hoses from mechanical and other damage.

- Design and construction of brake tubing and hose must ensure proper, adequate, and continued functioning.
- Installation must ensure proper functioning of the hose.
- Length and flexibility must accommodate all normal motions of the parts to which the hose is attached.
- Protection against mechanical damage must include protection against chafing, kinking, and mechanical damage.
- Protection from high temperature must include protection from or in a location away from exhaust pipes and other sources of high temperatures.

## Brake Warning Devices (393.51)

Buses, trucks, and truck tractors must be equipped with a signal that provides a warning to the driver when a failure occurs in the vehicle's service brake system. This signal requirement covers hydraulic brake systems, air brake systems, vacuum brake systems, and hydraulic brakes applied or assisted by air or vacuum.

## Automatic Brakes Adjusters (393.53)

- Each CMV manufactured on or after October 20, 1993, and equipped with a hydraulic brake system, must be equipped with an automatic brake adjustment system that meets the requirements of FMVSS No.105.
- Each CMV manufactured on or after October 20, 1994, and equipped with an air brake system, must be equipped with an automatic brake adjustment system that meets the requirements of FMVSS No.121.
- > Air-braked vehicles manufactured on or after October 20, 1994, and equipped with an external automatic adjustment mechanism, must be equipped with an automatic brake adjustment indicator that meets the requirements of FMVSS No.121.

# Antilock Brakes (393.55)

Certain CMVs must be equipped with antilock braking systems that meet the requirements of FMVSS No.105 (49 CFR 571.105) concerning hydraulic brake systems, and FMVSS No.121 (49 CFR 571.121) concerning air brake systems. The rules apply to:

- Truck-tractors manufactured on or after March 1, 1997;
- Air-braked single-unit trucks, buses, and trailers (including converter dollies) manufactured on or after March 1, 1998; and
- Hydraulic braked trucks and buses manufactured on or after March 1999.

# Windshield Condition (Part 393, Subpart D, Sections 393.60 - 393.61)

A vehicle's windshield must be free of discoloration and cracks in the area extending from the top of the steering wheel to within two inches of the top of the windshield.

# Fuel Systems (Part 393, Subpart E, Sections 393.65 – 393.69)

Each fuel system must be located so that:

- > No part of the system extends beyond the widest part of the vehicle.
- > No part of a fuel tank is forward of the front axle or a power unit.
- Fuel lines do not extend between a towed vehicle and the towing unit while the combination is in motion.
- No part of the fuel system of a bus manufactured on or after January 1, 1973, is located within or above the passenger compartment.

# Coupling Devices (Part 393, Subpart F, Sections 393.70 and 393.71)

These sections provide requirements for the attachment and location of the fifth wheel and requirements for the towing of full trailers. In addition, requirements for saddle mount operations are provided.

## Cargo Securement (Sections 393.100 - 393.136)

Cargo must be loaded and secured so that it will not shift or fall off the vehicle. The cargo securement regulations include minimum strength requirements for securement devices and requirements for protection against longitudinal and lateral movement of the cargo.

# Tires (393.75)

- No motor vehicle shall be operated on any tire that (1) has body ply or belt material exposed through the tread or sidewall, (2) has any tread or sidewall separation, (3) is flat or has an audible leak, or (4) has a cut to the extent that the ply or belt material is exposed.
- Any tire on the front wheels of a bus, truck, or truck tractor shall have a tread groove pattern depth of at least 4/32 of an inch when measured at any point on a major tread groove. The measurements shall not be made where tie bars, humps, or fillets are located.
- Any tire other than the tire on the front wheels of a bus, truck, or truck tractor shall have a tread groove pattern depth of at least 2/32 of an inch when measured at any point on a major tread groove. The measurement shall not be made where tie bars, humps or fillets are located.
- > No bus shall be operated with regrooved, recapped or retreaded tires on the front wheels.
- A regrooved tire with a load-carrying capacity equal to or greater than 2,232 kg (4,920 pounds) shall not be used on the front wheels of any truck or truck tractor.
- Tire loading restrictions (except on manufactured homes). No motor vehicle shall be operated with tires that carry a weight greater than that marked on the side-wall of the tire or, in the absence of such a marking, a weight greater than that specified for the tires in any of the publications of any of the organizations listed in Federal Motor Vehicle Safety Standard No. 119 (49 CFR 571.119, S5.1(b)) unless:
  - The vehicle is being operated under the terms of a special permit issued by the State; and
  - The vehicle is being operated at a reduced speed to compensate for the tire loading in excess of the manufacturer's rated capacity for the tire. In no case shall the speed exceed 80 km/hr (50 mph).
- Tire loading restrictions for manufactured homes built before January 1, 2002. Manufactured homes that are labeled pursuant to 24 CFR 3282.362(c)(2)(i) before January 1, 2002, must not be transported on tires that are loaded more than 18 percent over the load rating marked on the sidewall of the tire or, in the absence of such a marking, more than 18 percent over the load rating specified in any of the publications of any of the organizations listed in FMVSS No. 119 (49 CFR 571.119, S5.1(b)). Manufactured homes labeled before January 1, 2002, transported on tires overloaded by 9 percent or more must not be operated at speeds exceeding 80 km/hr (50 mph).
- Tire loading restrictions for manufactured homes built on or after January 1, 2002. Manufactured homes that are labeled pursuant to 24 CFR 3282.362 (c)(i) on or after January 1, 2002 must not be transported on tires loaded beyond the load rating marked on the sidewall of the tire or, in the

absence of such a marking, the load rating specified in any of the publications of any of the organizations listed in FMVSS No. 119 (49 CFR 571.119, S5.1 (b)).

- Tire inflation pressure. No motor vehicle shall be operated on a tire which has a cold inflation pressure less than that specified for the load being carried.
- If the inflation pressure of the tire has been increased by heat because of the recent operation of the vehicle, the cold inflation pressure shall be estimated by subtracting the inflation buildup factor shown in Table 1 from the measured inflation pressure.

|   | Minimum Inflation Pressure Buildup                              |  |  |
|---|---|--|--|
| Average speed of vehicle in the previous hour | Tires with 1.814 kg (4,000 lbs.)<br>maximum load rating or less | Tires with over 1.814 kg<br>(4,000 lbs.) load rating |  |
| 66-88.5 km/hr (41-55 mph)                     | 34.5 kPa (5 psi)  | 103.4 kPa (15 psi)                                   |  |

# Table 1—inflation Pressure Measurement Correction for Heat

# Sleeper berths (393.76)

> Dimensions —(1) Size. A sleeper berth must be at least the following size:

| Date of installation on motor vehicle                 | Length measured<br>on centerline of<br>longitudinal axis<br>(inches) | Width measured<br>on centerline of<br>transverse axis<br>(inches) | Height measured<br>from highest point of<br>top of mattress<br>(inches) <sup>1</sup> |
|---|--|---|--|
| Before January 1, 1953                                | 72   | 18  | 18   |
| After December 31, 1952<br>and before October 1, 1975 | 75   | 21  | 21   |
| After September 30, 1975                              | 75   | 24  | 24   |

<sup>1</sup>In the case of a sleeper berth which utilizes an adjustable mechanical suspension system, the required clearance can be measured when the suspension system is adjusted to the height to which it would settle when occupied by a driver.

- Shape. A sleeper berth installed on a motor vehicle on or after January 1, 1953 must be of generally rectangular shape, except that the horizontal corners and the roof corners may be rounded to radii not exceeding 10-1/2 inches.
- Access. A sleeper berth must be so constructed so that an occupant's ready entrance to, and exit from the sleeper berth is not unduly hindered.
- Location. A sleeper berth must not be installed in or on a semitrailer or full trailer other than a house trailer.
- A sleeper berth located within the cargo space of a motor vehicle must be securely compartmentalized from the remainder of the cargo space. A sleeper berth installed on or after January 1, 1953 must be located in the cab or immediately adjacent to the cab and must be securely fixed with relation to the cab.
- Exit from the berth. A sleeper berth installed after January 1, 1953 must have a direct and ready means of exit from the sleeper berth into the driver's seat or compartment. If the sleeper berth was installed on or after January 1, 1963, the exit must be a doorway or opening at least 18 inches high and 36 inches wide. If the sleeper berth was installed before January 1, 1963, the exit must have sufficient area to contain an ellipse having a major axis of 24 inches and a minor

axis of 16 inches.

- A sleeper berth installed before January 1, 1953 must either comply with the above paragraph relating to a sleeper berth installed after January 1, 1953 or have at least two exits, each of which is at least 18 inches high and 21 inches wide, located at opposite ends of the vehicle and usable by the occupant without the assistance of any other person.
- Communication with the driver. A sleeper berth which is not located within the driver's compartment and has no direct entrance into the driver's compartment must be equipped with a means of communication between the occupant and the driver. The means of communication may consist of a telephone, speaker tube, buzzer, pull cord, or other mechanical or electrical device.
- > Equipment. A sleeper berth must be properly equipped for sleeping. Its equipment must include:

◆ Adequate bedclothing and blankets; and

- Either:
- Springs and a mattress; or
- An innerspring mattress; or
- ◆ A cellular rubber or flexible foam mattress at least four (4) inches thick; or
- A mattress filled with a fluid and of sufficient thickness when filled to prevent "bottomingout" when occupied while the vehicle is in motion.
- Ventilation. A sleeper berth must have louvers or other means of providing adequate ventilation.
   A sleeper berth must be reasonably tight against dust and rain.
- Protection against exhaust and fuel leaks and exhaust heat. A sleeper berth must be located so that leaks in the vehicle's exhaust system or fuel system do not permit fuel system gases, or exhaust gases to enter the sleeper berth. A sleeper berth must be located so that it will not be overheated or damaged by reason of its proximity to the vehicle's exhaust system.
- Occupant restraint. A motor vehicle manufactured on or after July 1, 1971, and equipped with a sleeper berth must be equipped with a means of preventing ejection of the occupant of the sleeper berth during deceleration of the vehicle. The restraint system must be designed, installed, and maintained to withstand a minimum total force of 6,000 pounds applied toward the front of the vehicle and parallel to the longitudinal axis of the vehicle.

### Exhaust Systems (393.83)

Exhaust systems must meet the following requirements:

- The exhaust system and discharge must be located where it is not likely to burn or damage the electrical wiring, the fuel supply, nor any combustible part of the vehicle.
- The discharge from the exhaust system must not be located immediately below the fuel tank or the fuel tank filler pipe.
- > The exhaust system may not be temporarily repaired with patch or wrap material.
- > The exhaust pipe and mufflers must be securely fastened to the vehicle.
- The exhaust system may not leak or discharge at any point forward of or directly below the driver or sleeper compartment.

For trucks and truck tractors, the exhaust system must discharge at a location to the rear of the cab, or above and near the rear of the cab.

For a bus powered by a gasoline engine, the exhaust pipe must discharge at a point no farther forward than six inches forward of the rearmost part of the bus.

For a bus powered by diesel or other fuel (not gasoline), the exhaust pipe must discharge either

- > At a point no farther forward than 15 inches forward of the rearmost part of the bus, or
- > To the rear of all doors or windows designed to be open (not including emergency exits).

#### Rear End Protection (393.86)

Every CMV must be equipped with either bumpers or other devices that prevent the under ride of another vehicle. Tractors, pole trailers, and drive-away/tow-away vehicles are exempt. Certain trailers manufactured on or after January 26, 1998, must have rear impact guards that meet FMVSS Nos. 223 & 224. See Texas Exception - Admin. Rule 4.12(b)(1).

#### Seat Belts (393.93)

CMVs must be equipped with seats, seat belt assemblies, and seat belt anchorages as specified in the FMVSS.

#### **Emergency Equipment (393.95)**

CMVs must carry the following emergency equipment:

- > Fire extinguisher (not required for drive-away/tow-away operations)
- > Spare fuses Refer to Enforcement Guidance in Ops Policy 15, Miscellaneous Spare Fuses
- Warning devices for stopped vehicles

**Fire Extinguishers** must be securely mounted and readily accessible for use. Each extinguisher must have a gauge or other indicator that shows whether the extinguisher is fully charged, and a label showing its Underwriters' Laboratories (UL) rating.

The fire extinguisher(s) must meet one of the following standards:

- > One extinguisher with a UL rating of 5 B:C or more or
- > Two extinguishers each with a UL rating of 4 B:C or more.
- One extinguisher with a UL rating of 10 B:C, if the vehicle is transporting placardable quantities of hazardous material.

#### Suspension Systems (393.207)

Suspension systems are required to be structurally sound and in safe working order, including the following:

- Axles must be in proper alignment, and no positioning part can be cracked, broken, loose, or missing.
- > Adjustable axles must have locking pins in place.
- > Leaf springs must not be cracked, broken, missing, or shifted out of position.
- > Coil springs must not be cracked or broken.
- > Torsion bars must not be cracked or broken.
- > Air suspensions must support the vehicle in a level position, and must not leak.

#### Steering Systems (393.209)

Steering system must be in proper working order, which includes the following:

- Steering wheel must be properly secured and must not have any spokes cracked through or missing.
- > Steering wheel lash must meet the requirements of Section 393.209.
- Steering column must be securely fastened.
- Steering system must not have worn, faulty or welded universal joints, loose steering gear box, missing bolts, or a loose pitman arm on the steering gear output shaft.
- Power steering unit must not have loose or broken parts, frayed, cracked, or slipping belts, leaks; or insufficient fluid in reservoir.

# NOTES

# NOTES



Texas Highway Patrol Division Commercial Vehicle Enforcement

# Part 395 - Hours of Service of Drivers

# **GENERAL RULE - Property Carriers - Interstate (395.3)**

The following regulations only apply to **property carriers** and drivers operating in **interstate commerce**.

## 11 Hour Rule (395.3(a)(3))

Drivers are allowed to drive for 11 hours following 10 consecutive hours off duty.

## Rest Breaks (395.3(a)(3)(ii))

30 minute rest period. A consecutive 30-minute interruption of driving status may be satisfied either by offduty, sleeper berth or on-duty not driving time or by a combination of off-duty, sleeper berth and on-duty driving time.

### 14 Hour Rule (395.3(a)(2))

A motor carrier cannot permit or require a driver to drive beyond the 14th hour after coming on duty, except when a property-carrying driver complies with the provisions of 395.1(o) or 395.1(e)(2).

- The 14-hour duty period may not be extended with off-duty time for meal stops, fuel stops, and the like.
- > For 395.1(o), see 16 Hour Exception below.
- > For 395.1(e)(2) see Non-CDL Driver Exception below.

## 60 and 70 Hour Rules (395.3(b))

A motor carrier must not permit or require a driver to drive after having been on duty

- 60 total duty hours in any period of seven consecutive days if the carrier does not operate every day of the week, or
- 70 total duty hours in any period of consecutive eight days if the carrier does operate every day of the week.
- A driver may restart a 7/8 consecutive day period after taking 34 or more consecutive hours offduty.

### 16 Hour Exception to the 14 hour rule (395.1(o)) - Applies to INTERSTATE commerce only

Drivers may extend the 14 hour on-duty period by 2 additional hours if they:

- Are released from duty at the normal work reporting location for the previous 5 tours the driver has worked,
- Return to the normal work reporting location and are released from duty within 16 hours after coming on duty following 10 consecutive hours of rest, and
- Have not used this exception in the previous 6 consecutive days, except following a 34 -hour restart of a 7/8 day period.

# Non-CDL Driver Exception 395.1(e)(2)

Drivers who drive commercial motor vehicles which do not require a Commercial Driver's License may be exempted from 395.3(a)(2), 395.8, and 395.11 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) does not drive:
  - (A) After the 14<sup>th</sup> hour after coming on duty on 5 days of any period of 7 consecutive days; and
  - (B) After the 16<sup>th</sup> 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.

#### Sleeper Berth Exception (395.1(g))

Drivers may split on-duty time by using a sleeper berth period, but must comply with the hours-ofservice rules. These drivers may accumulate the equivalent of 10 consecutive hours off-duty by taking two periods of rest, provided:

- (1)(i) A driver who operates a property-carrying commercial motor vehicle equipped with a sleeper berth as defined in 395.2 and 393.76:
  - (A) Must, before driving, accumulate
    - (1) At least 10 consecutive hours off duty;
    - (2) At least 10 consecutive hours of sleeper-berth time;
    - (3) A combination of consecutive sleeper-berth and off-duty time amounting to at least 10 hours; or
    - (4) The equivalent of at least 10 consecutive hours off duty if the driver does not comply with paragraph (g)(1)(i)(A)(1), (2), or (3) of this section;
  - (B) May not drive more than 11 hours following one of the 10-hour off-duty periods specified in paragraph (g)(1)(i)(A)(1)-(4) of this section. However, driving is permitted only if 8 hours or fewer have passed since the end of the driver's last off-duty break or sleeper berth period of at least 30 minutes; and
  - (C) May not drive after the 14th hour after coming on duty following one of the 10-hour off-duty periods specified in paragraph (g)(1)(i)(A)(1)-(4) of this section; and
  - (D) Must exclude from the calculation of the 14-hour limit any sleeper berth period of at least 8 but less than 10 consecutive hours.
- (1)(ii) Specific requirements. The following rules apply in determining compliance with paragraph
   (g)(1)(i) of this section:
  - (A) The term "equivalent of at least 10 consecutive hours off duty" means: A driver may accumulate the equivalent of at least 10 consecutive hours off-duty by taking not more than two periods of either sleeper berth time or a combination of off-duty time and sleeper berth time if:
    - (1) Neither rest period is shorter than 2 consecutive hours;
    - (2) One rest period is at least 7 consecutive hours in the sleeper berth;
    - (3) The total of the two periods is at least 10 hours.
    - (4) Driving time cannot exceed the 11 or 14 hour limits in 395.3(a)(3) and 395.3(a)(2)
  - (B) Calculation of the 11-hour driving limit includes all driving time; compliance must be recalculated from the end of the first of the two periods used to comply with paragraph (g)(1)(ii)(A) of this section.
  - (C) Calculation of the 14-hour driving limit includes all time except qualifying rest periods under paragraph (g)(1)(ii) of this section.

# Industry Exceptions [395.1(I), (m), (n), (p) and (r) and 49 U.S.C. 31136 Notes – Exemptions From Requirements Relating to Commercial Motor Vehicles and Their Operators]

The regulation and the note to the federal statute list various industries which are exempt from some or all of the hours of service regulations. Please consult with the FMCSA if one of the following applies to you:

- Transportation of agricultural commodities and farm supplies.
- Transportation and operation of ground water well drilling rigs
- Transportation of construction materials and equipment
- Snow and ice removal
- > Operators providing transportation to movie production sites
- Railroad signal employees
- Utility Service Vehicles
- Transportation to and from a motion picture production site
- Covered Farm Vehicle

## **GENERAL RULE - Passenger Carriers - Interstate (395.5)**

The following regulations only apply to **passenger carriers** and drivers operating in **interstate commerce.** 

#### 10 Hour Rule

Drivers are allowed to drive for 10 hours following 8 consecutive hours off duty.

#### 15 Hour Rule

A motor carrier cannot permit or require a driver to drive after 15 hours are spent on duty following 8 consecutive hours off-duty.

#### 60 and 70 Hour Rules

A motor carrier must not permit or require a driver to drive after having been on duty

- 60 total duty hours in seven days
- 70 total duty hours in eight days

## **GENERAL RULE - All Carriers - Intrastate In Texas (37 TAC 4.12)**

#### 12 Hour Rule

Drivers are allowed to drive for 12 hours following 8 consecutive hours off duty.

#### 15 Hour Rule

A motor carrier cannot permit or require a driver to drive after 15 hours are spent on duty following 8 consecutive hours off-duty.

NOTE: Drivers in intrastate commerce violating the 12 or 15 hour limits shall be placed out-of-service for eight consecutive hours.

#### 70 Hour Rule

A motor carrier must not permit or require a driver to drive after having been on duty

- > 70 total duty hours in seven days
- > A driver may restart a 7 consecutive day period after taking 34 or more consecutive hours off-duty.

**Note:** 395.3(a)(3)(ii), 395.3(c)(2) and 395.3(d) does not apply to drivers engaged in intrastate transportation.

## **Hours of Service Documentation**

#### Driver's Record of Duty Status (395.8)

Every driver shall prepare a record of duty status (Driver's daily log) in his/her own handwriting for each 24-hour period, unless operating under the 150 air-mile radius exemption.

Failure to complete or retain the log, or knowingly falsifying logs or other reports, makes the driver and/or carrier liable to prosecution.

#### Submitting/Retaining Duty Status Log (395.8(a)(2)(ii))

The driver must submit the original log sheet to the employing carrier within 13 days after completion. When a motor carrier uses a driver initially or intermittently, that carrier must obtain from him/her a signed statement giving the total time on duty for the preceding 7 days and the time at which he/she was last relieved of duty. Records of duty status must be maintained for a minimum of 6 months at the carrier's principal place of business, with all supporting documents.

#### Automatic On-Board Recording Devices (395.15)

A motor carrier that installs and requires a driver to use an automatic on-board recording device before December 18, 2017 may continue to use the compliant automatic on-board recording device no later than December 16, 2019. Otherwise, the authority to use automatic on-board recording devices ends on December 18, 2017.

The driver must still have in his/her possession records of duty status in automated or written form, for the previous 7 consecutive days. The driver must sign all hard copies of the driver's record of duty status.

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

#### Electronic Logging Device (ELD) (395.20)

Beginning December 18, 2017, electronic logging devices will be required to be installed and used to record a driver's hours of service under 395.8(a). Motor Carriers required to use an ELD must use only an ELD listed in on the Federal Motor Carrier Safety Administration's registered ELDs list, accessible through the Agency's website, <u>http://www.fmcsa.dot.gov/devices</u>.

A motor carrier may require a driver to record the driver's duty status manually, rather than require the use of an ELD if the driver is operating a commercial motor vehicle:

- In a manner requiring completion of a record of duty status on not more than 8 days within any 30-day period;
- In a drive-away/tow-away operation in which the vehicle being <u>driven</u> is part of the shipment being delivered;
- In a drive-away/tow-away operation in which the vehicle being <u>transported</u> is a motor home or a recreational vehicle trailer; or
- That was manufactured before model year 2000, as reflected in the vehicle identification number.

Motor carriers must manage ELD accounts, including creating, deactivating and updating accounts, and ensure that properly authenticated individuals have ELD accounts with appropriate rights. Driver and support personnel identification data must be assigned unique ELD usernames.

If a driver uses a portable ELD, the motor carrier shall ensure that the ELD is mounted in a fixed position during operation of the commercial motor vehicle and visible to the driver when the driver is

seated in the normal driving position.

Drivers must have in their possession an ELD information packet consisting of a user manual, an instruction sheet with step-by-step instructions for data transfer to produce the hours of service records, and a supply of blank driver's records of duty status graph-grids sufficient to record the driver's duty status and other related information for a minimum of 8 days.

A driver and the motor carrier must ensure that the driver's ELD records are accurate. A motor carrier may not coerce a driver to make a false certification of the driver's data entries or record of duty status. A motor carrier must not alter or erase, or permit or require alteration or erasure of, the original information collected concerning the driver's hours of service, the source data streams used to provide that information, or information contained in any ELD that uses the original information and HOS source data.

#### 150 Air-mile Radius Exemption - Interstate (395.1(e)(1))

A driver is exempt from maintaining the driver's daily log requirements of Section 395.8 if all of the following requirements are met:

Short-haul operations—(1) 150 air-mile radius driver. A driver is exempt from the requirements of §§395.8 and 395.11 if:

(i) The driver operates within a 150 air-mile radius (172.6 statute miles) 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 14 consecutive hours;

(iii)(A) A property-carrying commercial motor vehicle driver has at least 10 consecutive hours off-duty separating each 14 hours on-duty;

(B) A passenger-carrying commercial motor vehicle driver has at least 8 consecutive hours off-duty separating each 14 hours on-duty; and

(iv) 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.

#### 150 Air-mile Radius Exception - Intrastate Texas (37 TAC 4.12)

A driver is exempt from maintaining the driver's daily log requirements of Section 395.8 if all of the following requirements are met:

The driver operates within a 150 air-mile radius of the normal work reporting location.
 The driver returns to the work reporting location and is released from work within 14 consecutive hours.

>Each 14 hours on duty are separated by at least 8 consecutive hours off duty.

The motor carrier that employs the driver maintains and retains for a period of six months true and accurate time and business records that show:

- > The time the driver reports for duty each day.
- > The total number of hours the driver is on duty each day.
- > The time the driver is released from duty each day.
- > The total time for the preceding seven days for first-time or intermittent drivers.

# NOTES

### Hours of Service Record for First Time or Intermittent Drivers

#### Hours of Service Record for First Time or Intermittent Drivers

**Instructions:** When using a driver for the first time, or intermittently, a signed statement must be obtained, giving the total time on duty (driving, and on-duty not driving) during the immediate preceding seven days, and that time at which the driver was last relieved from the previous employer prior to beginning work

| Name (Print)  |       |                     |              |                                     |
|---------------|-------|---------------------|--------------|-------------------------------------|
|               | First |                     | ddle         | Last                                |
|               |       | DAY                 | TIME ON DUTY |                                     |
|               |       | 1                   |              |                                     |
|               |       | 2                   |              |                                     |
|               |       | 3                   |              |                                     |
|               |       | 4                   |              |                                     |
|               |       | 5                   |              |                                     |
|               |       | 6                   |              |                                     |
|               |       | 7                   |              |                                     |
|               |       |                     |              |                                     |
|               |       | TOTAL               |              |                                     |
|               |       |                     |              | to the best of my knowledge andon   |
| Signature:    |       |                     | Date:        |                                     |
| Nata This for |       | an a summaria d fam |              | the new or intermittent driver's on |

Note: This form is provided as a suggested format for a documenting the new or intermittent driver's onduty time for the previous 7 days, as required by 49 C.F.R. 395.8(j)(2). Use of this form is not required, but obtaining documentation and the signature of the driver is required.

| -<br>Dayi NJoury [Month]/(Mois) [Near] (Arrede) [V] CPCIE [N Hz/7 Days [120 Hz/4 Days [Option-Free transmission of the spinness of the day<br>(Spin-transmission of the day of the spin of the spin of the spinness of the spinne | Home Terminal Name and Address / Nore et adresse du terminal<br>Principal Place of Business Name and Address / Nore et adresse de la principale place d'affaires |  |  |  | 7 8 9 10 11 12 13 14 15 16 17 18 19 20 21 22 23 24<br>4 4 4 4 4 4 4 4 4 4 5 16 17 14 4 4 4 4 5 1 7 1 7 1 4 4 4 4 4 7 7 7 1 4 4 4 4 4 7 7 7 7   | 2     3     4     5     6     7     8     9     10     11     12     13     14     Personal Use / Usage personnel:       2     3     4     5     6     7     8     9     10     11     12     13     14       2     3     4     5     6     7     8     9     10     11     12     13     14       2     3     4     5     6     7     8     5     6     14       2     3     4     6     1     12     13     14     5     5       3     4     6     0     1     12     13     14     5     5       4     10     1     12     13     14     5     5     5       4     13     14     5     6     10     1     12     14 | Note: This form is provided as a suggested format for completing a Record of Duty Status (or Driver's Daily Log).<br>A driver may use any format for recording duty status that complies with 49 CFR 395.8. |
|---|--|--|--|--|--|--|---|
| <b>BRNALIER</b>   | Boding Odometer Total Distance Drive Tolay<br>Lectur Elemetrque fin Resure totekpartoure asperitie   | ach tais/Marentejsde plaque Einnachtedation findipar Einger entlej<br>Name of Co-Driver / Nom du codquipier<br>I certifie nues centries are true and contract:<br>de certifie nues cen senselmements sont exartes et models: |  |  |  | PREVICUS<br>That have on drive<br>14 DATS<br>Differ have on drive<br>PSRECEDENTS<br>Prodecharst drive  | form is provided as a sug<br>A driver may use any fo  |
| DRIVER'S DAILY LOG / REGISTRE /0  | Skriting Odcareter Ending (<br>Lectur threithige-dipart Electur Ele  |  | The structure of the st | 3. Dirfing time / Durfe de conduite<br>4. Ou dury time other than driving time /<br>Tengs de service autre que la durée<br>de conduité | REMARKS / 0<br>REMARGUES<br>If deferred off duty:<br>Temps de repos différéi<br>(v)<br>Day 1 / Jour 1<br>Day 2 / Jour 2<br>SHIPPING DOCUMENTS: | XPÉDIER:<br>N° de note<br>(feste   | Supper & comnodity<br>Expediter / marchandise<br>Note: This f   |

# Record of Duty Status (Driver's Daily Log) Under 49 CFR 395.8

#### SUMMARY OF HOURS WORKED AND HOURS AVAILABLE

This summary page may be used either alone or in conjunction with the "Weekly Recap" or "Redi Recap" section on the face of many Record of Duty Status (RODS) forms to assist the driver in computing his or her time. Entries should be made each day, even if the driver does not work on that particular day. The record of "Total On Duty Hours" under the heading "PREVIOUS MONTH"S REFERENCE" may be used to assist in computing the hours available at the beginning of the month, and is a reminder that the last several days of the prior month do affect the hours available for the first several days of this month.

| PREVIOUS MONTH'S REFERENCE                   |  |                     | Day | Date | Hours               | Total Hours        | Total Hours        | Hours Eligible to          |
|--|--|---------------------|-----|------|---------------------|--------------------|--------------------|----------------------------|
| Date<br>(1)                                  | Ref. #<br>(2)                                | Hours<br>Worked (3) | (4) | (5)  | Worked<br>Today (6) | Last 6 days<br>(7) | Last 7 Days<br>(8) | Work/Drive<br>Tomorrow (9) |
|  |  |                     | 1   |      |                     |                    |                    |                            |
|  |  |                     | 2   |      |                     |                    |                    |                            |
|  |  |                     | 3   |      |                     |                    |                    |                            |
|  |  |                     | 4   |      |                     |                    |                    |                            |
|  |  |                     | 5   |      |                     |                    |                    |                            |
|  |  |                     | 6   |      |                     |                    |                    |                            |
|  |  |                     | 7   |      |                     |                    |                    |                            |
|  | Total  |                     | 8   |      |                     |                    |                    |                            |
|  |  | •                   | 9   |      |                     |                    |                    |                            |
| Inst   | ructions                                     |                     | 10  |      |                     |                    |                    |                            |
| - Columns 1 & 5                              |  |                     | 11  |      |                     |                    |                    |                            |
| <u>- Column 2</u> – if r<br>locate time reco |  |                     | 12  |      |                     |                    |                    |                            |
| - Column 3 & 6                               |  |                     | 13  |      |                     |                    |                    |                            |
| Time (status 3 c                             | on a RODS) an                                | d On-Duty           | 14  |      |                     |                    |                    |                            |
| Not Driving Time                             | e (Status 4 on a                             | a RODS) for         | 15  |      |                     |                    |                    |                            |
| each day.<br>- Column 7 OR                   | 8 – Add un the                               | Time                | 16  |      |                     |                    |                    |                            |
| Worked (Colum                                | ns 3 & 6) for th                             |                     | 17  |      |                     |                    |                    |                            |
| appropriate num                              |  |                     | 18  |      |                     |                    |                    |                            |
| = Use Colum<br>following r                   | n (7) if you are                             | under the           | 19  |      |                     |                    |                    |                            |
|  | 1 7 days under                               |                     | 20  |      |                     |                    |                    |                            |
|  | 95.3(b)(1) or                                |                     | 21  |      |                     |                    |                    |                            |
| 49 CFR 39                                    |  |                     | 22  |      |                     |                    |                    |                            |
|  | 17 days under                                |                     | 23  |      |                     |                    |                    |                            |
|  | = Use column (8) if you are under            |                     | 24  |      |                     |                    |                    |                            |
|  | 49 CFR 395.3(b)(2) or<br>49 CFR 395.5(b)(2). |                     |     |      |                     |                    |                    |                            |
| 49 CFR 39                                    | 90.0(D)(Z).                                  |                     | 26  |      |                     |                    |                    |                            |
| - Column 9 – Su                              | ubtract Column                               | 6 and               | 27  |      |                     |                    |                    |                            |
| Column 7 or 8 fr                             | Column 7 or 8 from either 60 or 70 hours,    |                     | 28  |      |                     |                    |                    |                            |
|  | as appropriate, and enter here.              |                     |     |      |                     |                    |                    |                            |
| This is the amou<br>work/driving on          |  |                     | 30  |      |                     |                    |                    |                            |
|  | the following d                              | ay.                 | 31  |      |                     |                    |                    |                            |

On the day before a driver completes a proper 34 hour restart under 49 C.F.R. 395.3(c) or under 37 TAC 4.12, the driver may line through the blocks and write "34 hour restart." After a proper restart, the driver's hours available will revert to 60 or 70 hours, as appropriate.

*Note :* This form is provided as a suggested format for ensuring a driver complies with the appropriate "weekly" rule. A driver or a motor carrier is not required to use tiny format, but is required to comply with the applicable rule cited in the "Instructions" block above.

#### DRIVER'S TIME RECORD

| Driver  | Driver's Name            |  |  |                       |                       | M | onth                 | Y | 'ear |  |   |  |
|---|--------------------------|--|--|-----------------------|-----------------------|---|----------------------|---|------|--|---|--|
| O<br>Inters<br>- Oper<br>mile<br>- Retu<br>releas<br>conse<br>- At le<br>off du<br>hours<br>- Drive |                          | JS" (RODS)<br>50 air-<br>rters<br>rs and is<br>in 14<br>e hours<br>h 14<br>hours | <ul> <li>PREPARE THIS REPORT INSTEAD OF THE "RECORD</li> <li>OR "DRIVER'S DAILY LOG" IF THE FOLLOWING</li> <li>Interstate Passenger         <ul> <li>Operates within the 150 airmile radius of headquarters</li> <li>Returns to headquarters and is released from work within 14 consecutive hours</li> <li>At least 8 consecutive hours off duty separates each 14 hours of duty.</li> <li>Drives no more than 10 hours after each 8 hours off duty.</li> </ul> </li> </ul> |                       |                       |   |                      |   |      | INTERM<br>DRIN<br>Shall complete<br>days precedir<br>driving is per<br>driving is pert<br>first seven days<br>the appropriat<br>days from the<br>shall also be ree | <b>/ERS</b><br>this form<br>ng any<br>performed<br>formed in<br>s of this m<br>the number<br>previous r | day<br>I. If<br>n the<br>nonth,<br>er of |
| Date  | Start Time<br>"All Duty" | End Tim<br>"All Duty   | -  | Total Hours<br>Worked | Total Hour<br>Driving | S | Truck/Unit<br>Number |   | Head | eadquarters Location   |   |  |
| 1   | j                        |  |  |                       |                       |   |                      |   |      |  |   |  |
|   |                          |  |  |                       |                       | - |                      |   |      |  |   |  |
| 2<br>3<br>4   |                          |  |  |                       |                       |   |                      |   |      |  |   |  |
| 4   |                          |  |  |                       |                       |   |                      |   |      |  |   |  |
| 5   |                          |  |  |                       |                       |   |                      |   |      |  |   |  |
| 6   |                          |  |  |                       |                       | - |                      |   |      |  |   |  |
| 7   |                          |  |  |                       |                       | - |                      |   |      |  |   |  |
| 8   |                          |  |  |                       |                       | _ |                      |   |      |  |   |  |
| 9   |                          |  |  |                       |                       | - |                      |   |      |  |   |  |
| 10  |                          |  |  |                       |                       | _ |                      |   |      |  |   |  |
| 11  |                          |  |  |                       |                       | _ |                      |   |      |  |   |  |
| 12  |                          |  |  |                       |                       | _ |                      |   |      |  |   |  |
| 13  |                          |  |  |                       |                       | _ |                      |   |      |  |   |  |
| 14  |                          |  |  |                       |                       |   |                      |   |      |  |   |  |
| 15  |                          |  |  |                       |                       |   |                      |   |      |  |   |  |
| 16  |                          |  |  |                       |                       |   |                      |   |      |  |   |  |
| 17  |                          |  |  |                       |                       |   |                      |   |      |  |   |  |
| 18  |                          |  |  |                       |                       |   |                      |   |      |  |   |  |
| 19  |                          |  |  |                       |                       |   |                      |   |      |  |   |  |
| 20  |                          |  |  |                       |                       |   |                      |   |      |  |   |  |
| 21  |                          |  |  |                       |                       |   |                      |   |      |  |   |  |
| 22  |                          |  |  |                       |                       |   |                      |   |      |  |   |  |
| 23  |                          |  |  |                       |                       |   |                      |   |      |  |   |  |

Check this box if the driver performed no driving duties during this month or the first seven days of the following month.

This form must be prepared monthly by each DOT certified driver unless time records are exclusively kept on a RODS. Indicate "days off."

Note: This form is provided as a suggested format for a driver's time record under 49 C.F.R. 395.1(e) and 37 TEX. ADMIN. CODE § 4.12. Use of this or a similar form is not required. Any day in which a driver does not meet the "CRITERIA" listed above, the driver must record time on a Record of Duty Status/Driver's Daily Log form.

# NOTES

# NOTES



Texas Highway Patrol Division Commercial Vehicle Enforcement

## Part 396 - Inspection, Repair, and Maintenance

### General Requirements (396.3(a))

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

### Record Keeping Requirements (396.3(b))

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 push-out windows, emergency doors, and marking lights.

#### Retention Requirements (396.3(c))

These records must be retained for one year at the location where the vehicle is garaged, and maintained for six months after the vehicle leaves the carrier's control (via sale, trade-in, or scrap).

#### Roadside Inspection Reports (396.9(d)(1) and (d)(2))

Any driver who receives a roadside inspection report must deliver it to the motor carrier. Motor Carriers must review the report and correct violations noted. You can receive an e-mail whenever one of your trucks is inspected by completing an MCS-32 form.

### Certification of Roadside Inspection Reports (396.9(d)(3))

An official of the motor carrier is to examine the roadside inspection report and ensure that any violations or defects noted on the report are corrected. Within 15 days after the inspection, the carrier must sign the completed roadside inspection report to certify that all violations have been corrected, and then return it to the indicated address. A copy must be retained for 12 months from the date of inspection.

#### Post-Trip Inspection Report (396.11)

The driver of a passenger-carrying CMV subject to this regulation must prepare a daily written post-trip inspection report at the end of each driving day even if no defect or deficiency is discovered. The driver of a property-carrying CMV must prepare an inspection report only when a defect or deficiency is discovered by or reported to the driver. This report must cover at least the following parts and accessories:

- Service Brakes (including trailer brake connections)
- Parking (hand) brake
- Steering mechanism
- Lighting devices and reflectors
- Tires
- > Horn

- Windshield wipers
- Rearview mirrors
- Coupling devices
- Wheels and rims
- Emergency equipment

The report must list any condition that the driver either found or had reported to him/her that would affect safety of operation or cause a breakdown. If no defect or deficiency is reported or found, the report should state this. The driver must sign the report in all cases. The carrier shall ensure that a certification has been made as to any damage, defect or deficiency has been corrected, or state those damages, defects or deficiencies do not require immediate correction, before the vehicle is operated again. Carriers must keep the original post-trip inspection report and the certification of repairs for at least three months from the date of preparation.

Before starting out on the next trip, the driver must be satisfied that the motor vehicle is in safe operating condition. If the last vehicle inspection report notes any deficiencies, the driver must review and sign to acknowledge that necessary repairs have been completed.

#### Exceptions (396.11(d))

The rules in this section shall not apply to:

- > a private motor carrier of passengers (non-business),
- a drive-away/tow-away operation, or
- > any motor carrier operating only one commercial motor vehicle.

#### **Periodic Inspection (396.17)**

Every CMV, including each segment of a combination vehicle requires periodic inspection that must be performed at least once every 12 months. At a minimum, inspections must include all items enumerated in the Minimum Periodic Inspection Standards of the FMCSR except if the motor carrier is subject to a mandatory state inspection.

**Note:** The term commercial motor vehicle includes each vehicle in a combination vehicle. For example, for a tractor semitrailer, full trailer combination, the tractor, semitrailer, and the full trailer (including the converter dolly if so equipped) shall each be inspected.

Documentation (report, sticker, or decal) of the most recent periodic inspection must be kept on the vehicle (396.17(c)).

#### Periodic Inspection Recordkeeping Requirements (396.21)

- (a) The qualified inspector performing the inspection shall prepare a report which:
  - (1) Identifies the individual performing the inspection;
  - (2) Identifies the motor carrier operating the vehicle;
  - (3) Identifies the date of the inspection;
  - (4) Identifies the vehicle inspected;
  - (5) Identifies the vehicle components inspected and describes the results of the inspection, including the identification of those components not meeting the minimum standards set forth in Appendix G to this subchapter; and
  - (6) Certifies the accuracy and completeness of the inspection as complying with all the requirements of this section.
- (b)(1) The original or a copy of the inspection report shall be retained by the motor carrier or other entity who is responsible for the inspection for a period of fourteen months from the date of the inspection report. The original or a copy of the inspection report shall be retained where the vehicle is either housed or maintained.
  - (2) The original or a copy of the inspection report shall be available for inspection upon demand of an authorized Federal, State or local official.
  - (3) Exception. Where the motor carrier operating the commercial motor vehicles did not perform the commercial motor vehicle's last annual inspection, the motor carrier shall be responsible for obtaining the original or a copy of the last annual inspection report upon demand of an authorized Federal, State, or local official.

#### **Inspector Qualification (396.19)**

Motor carriers must ensure that persons performing annual inspections are qualified as follows:

- > understand the inspection standards of Part 393 and Appendix G of the FMCSR
- > be able to identify defective components
- > have knowledge and proficiency in methods, procedures, and tools.

Inspectors may have gained experience or training by:

- completing a State or Federal training program, or earning a State or Canadian Province qualifying certificate in commercial motor vehicle safety inspections
- > a combination of other training or experience totaling at least a year.

Motor carriers must retain evidence of an inspector's qualifications until one year after the inspector ceases to perform inspections for the carrier.

#### Equivalent to Periodic Inspection (396.17 - 396.23)

A commercial motor vehicle (CMV) registered in Texas must meet periodic inspection requirements through the Texas, or another approved state, CMV inspection program. Texas trucking companies with vehicles registered in Texas, but domiciled in other states will be able to have their equipment legally inspected in the states they are domiciled in while maintaining Texas registration. The following equivalents listed in the federal regulations only apply to carriers in states without a mandatory inspection program:

- > Self-inspection by qualified employee; or
- Third party inspection by qualified individual

#### **Brake Inspector Qualification (396.25)**

The motor carrier is responsible for ensuring that all inspections, maintenance, repairs, and service to brakes of commercial motor vehicles comply with these regulations. The carrier must ensure that the employees responsible for brake inspection, maintenance, service, or repairs meet minimum brake inspector qualifications.

The brake inspector must:

- > understand and be able to perform the brake service and inspection.
- know the methods, procedures, tools and equipment needed; and
- > be qualified to perform brake service or inspection by training and/or experience.

Qualifying brake training or experience includes successful completion of:

- > a State, Canadian Province, Federal agency, or union training program,
- a State-approved training program,
- training that led to attainment of a State or Canadian Province qualifying certificate to perform assigned brake service or inspection tasks, including passage of CDL air brake tests in the case of a brake inspection, or
- > one year of brake-related training, experience, or combination of both.

Motor carriers must maintain evidence of brake inspector qualification at the principal place of business or the location where the inspector works. Evidence must be retained for the period during which the brake inspector is employed in that capacity, and for one year thereafter.

#### North American Standard Inspection Procedure



For Levels II, III, IV and V, omit steps that do not apply. For more detailed information, see the written procedures contained in the CVSA Operations Manual.



- Choose the Inspection Site
- Select a safe location. It should be paved, lovel, away from yet visible to traffic and able to support the weight of the vehicle.
- Avoid hills, curves, soft shoulders and construction sites.
- Approach the Vehicle
- Observe the driver.

ENCLE SAR

- Adhere to inspector safety policies.
- · Be alert for loaks and unsecured cargo,

#### 🗿 Greet and Prepare Driver

- · Identify yourself.
- Ensure the driver understands and is able to respond to inquiries and directions.
- Place chock blocks on the driver's side.
- Explain the inspection procedure.
- Ensure engine is off.
- Check the driver's seat, the seat belt use and condition.
- Observe the driver's overall condition for illness, fatigue or other signs of impairment.
- Check for illegal presence of alcohol, drugs, weapons or other contraband.

#### Interview Driver

- Ask the driver for starting location. final destination, load description, time traveled, most recent stop and fueling location(s).
- Ask the driver what other jobs he/she has worked in the past week.

#### Collect the Driver's Documents

 Collect Medical Examiner's Certificate and Skill Performance Evaluation (SPE) Certificate (if applicable).

- Collect driver's license or commercial driver's license (CDL) and record of duty status.
- Collect shipping papers.
- Collect periodic inspection certificates, CVIP.
- Collect bills of lading, receipts, other documents used to verify record of duty status and trip envelope.
- Check for the Presence of Hazardous Materials/Dangerous Goods
- Check shipping papers, markings, labels and placards.
- Check for any leaking material or unsecured cargo.
- ldentify the Carrier
- identify the carrier by using vehicle identification, vehicle registration, insurance, operating authority and driver interview.
- Examine Driver's License or CDL
- Check the driver's license or CDL expiration date, class, endorsements, restrictions and status.
- Check Medical Examiner's Certificate and Skill Performance Evaluation (SPE) Certificate (If Applicable)
- Check certificate(s) date imay be valid for up to 24 months).
- Check corrective lens requirement.
- Check hearing ald requirement.
- Check physical limitations.

Note: The medical qualifications may be contained in the driver's license. Proper class indicates adequate medical requirements.

- Check Record of Duty Status
  - Check hours of service verification.
- If driver claims to be exempt, check that driver meets all criteria for said exemption(s).

1

- · Check accuracy of record.
- Review Driver's Daily Vehicle Inspection Report (If Applicable)
- Review the required vehicle inspection report to verify that listed safety defects have been repaired.
- Review Periodic Inspection Report(s)
- Ensure vehicle has passed the required inspection and has the required documents and decals.
- Prepare Driver for Vehicle Inspection
- Explain the vehicle inspection procedure.
- Advise the driver of the use of hand signals.
- Check the chock blocks, have the driver put the vehicle transmission in neutral, release all the brakes, ensure the air pressure is at maximum, turn engine off and ensure the key is in the "on" position.
- Instruct the driver to remain at the controls.

#### Inspect Front of Tractor

- Check headlamps, turn signals (do not use four-way flashers to check turn signals) and all other required lamps for improper color, operation, mounting and visibility.
- Check windshield wipers and washers for proper operation.
- Check the function of the horn.
- Inspect Left Front Side of Tractor
- Check front wheel, rim, hub and tire.

over

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#### North American Standard Inspection Procedure -Page 2



# NOTES

#### Driver's Vehicle Inspection Report Under 49 C.F.R. 396.11

| Driver's Inspection - Check any defective item and give details under "Remarks | ." |
|--|----|
|--|----|

| Date:  | Truck/Tractor No.  |             |   |  |  |  |
|--|--|-------------|---|--|--|--|
| Air Compressor       Image: Compressor         Air Lines       Battery         Battery       Brake Accessories         Brakes       Image: Compressor         Carburetor       Image: Compressor         Clutch       Image: Compressor         Defroster       Image: Compressor         Drive Line       Image: Compressor         Fignine       Image: Compressor         Front Axle       Image: Compressor         Fuel Tanks       Image: Compressor         Heater       Image: Compressor         Horn       Image: Compressor | Lights<br>Head - Stop<br>Tail - Dash<br>Turn Indicators<br>Mirrors<br>Muffler<br>Oil Pressure<br>On-board Recorder<br>Radiator<br>Rear End<br>Reflectors |             | Safety Equipment<br>Fire Extinguisher<br>Flags-Flares-Fuses<br>Spare Bulbs & Fuses<br>Spare Seal Beam<br>Springs<br>Starter<br>Steering<br>Tachograph<br>Tires<br>Transmission<br>Wheels<br>Windows<br>Windshield Wipers<br>Other |  |  |  |
| Trailer No.  | Doors<br>Hitch<br>Landing Gear<br>Lights - All<br>Roof   |             | Springs<br>Tarpaulin<br>Tires<br>Wheels<br>Other  |  |  |  |
| Trailer No.  | Doors<br>Hitch<br>Landing Gear<br>Lights - All<br>Roof   |             | Springs<br>Tarpaulin<br>Tires<br>Wheels<br>Other  |  |  |  |
| Remarks:   |  |             |   |  |  |  |
|  |  |             |   |  |  |  |
| The Condition of the above vehicle(s) is/a   | are Satisfactory   |             |   |  |  |  |
| Driver's Printed Name:   | Driver's Signature:  |             | <del></del>   |  |  |  |
| Mechanics Certification (Not Required if Cor   | dition of Vehicle(s) was/were Satisfac   | ctory):     |   |  |  |  |
| Above defects were corrected.  | defects need not be corrected for safe   | e oper      | ation of the vehicle(s)   |  |  |  |
| Mechanic's Signature:  | Date:  |             |   |  |  |  |
| Next Driver's Review (Not Required if Condit   | ion of Vehicle(s) was/were Satisfacto  | <u>ry):</u> |   |  |  |  |
| Driver's Signature:  | Date:  |             |   |  |  |  |
| Note: This form is provided as a suggested format for performing and documenting a driver's vehicle inspection.<br>A motor carrier may use any format for reporting a driver's vehicle inspection which complies with 396.11.  |  |             |   |  |  |  |

#### VEHICLE SERVICE DUE STATUS REPORT Under 49 C.F.R. 396.3

|                       |                       | VEHICLE IDE                      | ENTIFICATION                |                                   |                |  |  |  |  |
|-----------------------|-----------------------|----------------------------------|-----------------------------|-----------------------------------|----------------|--|--|--|--|
|                       |                       |                                  |                             |                                   |                |  |  |  |  |
| Make                  |                       |                                  | Serial Number               |                                   |                |  |  |  |  |
| Year                  |                       |                                  | Tire Size                   |                                   |                |  |  |  |  |
| Company Numb          | er/Other ID           |                                  | Owner (if leased)           |                                   |                |  |  |  |  |
|                       |                       |                                  |                             |                                   |                |  |  |  |  |
| Date of<br>Inspection | Type of<br>Inspection | Mileage at Time<br>of Inspection | Date Next<br>Inspection Due | Mileage Type of<br>Inspection Due | Inspection Due |  |  |  |  |
|                       |                       |                                  |                             |                                   |                |  |  |  |  |
|                       |                       |                                  |                             |                                   |                |  |  |  |  |
|                       |                       |                                  |                             |                                   |                |  |  |  |  |
|                       |                       |                                  |                             |                                   |                |  |  |  |  |
|                       |                       |                                  |                             |                                   |                |  |  |  |  |
|                       |                       |                                  |                             |                                   |                |  |  |  |  |
|                       |                       |                                  |                             |                                   |                |  |  |  |  |
|                       |                       |                                  |                             |                                   |                |  |  |  |  |
|                       |                       |                                  |                             |                                   |                |  |  |  |  |
|                       |                       |                                  |                             |                                   |                |  |  |  |  |
|                       |                       |                                  |                             |                                   |                |  |  |  |  |
|                       |                       |                                  |                             |                                   |                |  |  |  |  |
|                       |                       |                                  |                             |                                   |                |  |  |  |  |
|                       |                       |                                  |                             |                                   |                |  |  |  |  |
|                       |                       |                                  |                             |                                   |                |  |  |  |  |
|                       |                       |                                  |                             |                                   |                |  |  |  |  |
|                       |                       |                                  |                             |                                   |                |  |  |  |  |
|                       |                       |                                  |                             |                                   |                |  |  |  |  |
|                       |                       |                                  |                             |                                   |                |  |  |  |  |

Note: This form is provided as a suggested format for performing and documenting a vehicle's inspection schedule. A motor carrier may use any format for tracking a vehicle's inspections which complies with 396.3.

#### INSPECTION, REPAIR & MAINTENANCE RECORD Under 49 C.F.R. 396.3

|                      | VEHICLE IDENTIFICATION                               |
|----------------------|--|
| Make                 | Serial Number  |
| Year                 | Tire Size  |
| Company Number/Other | D Owner (if leased)                                  |
| Date                 | Operation Performed: Inspection, Maintenance, Repair |
|                      |  |
|                      |  |
|                      |  |
|                      |  |
|                      |  |
|                      |  |
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|                      |  |
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|                      |  |
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Note: This form is provided as a suggested format for documenting a vehicle's inspection, maintenance and repairs. A motor carrier may use any format for tracking a vehicle's inspections which complies with 396.

#### ANNUAL VEHICLE INSPECTION REPORT Under 49 C.F.R. 396.17 through 396.21

|                  |  |      |     |        |          |   | -E       |       | REPORT  | FLI                | EET UNIT NUMBER        |
|------------------|--|------|-----|--------|----------|---|----------|-------|---------|--------------------|------------------------|
|                  |  |      |     |        |          |   | T        |       |         |                    |                        |
|                  |  |      |     |        |          |   |          | DATE  | E       |                    |                        |
| MOTOR CARRIER    | ROPERATOR  |      |     |        |          | INSPECTOR'S NAME (PRINT OR                            | TYP      | 9     |         |                    |                        |
| ADORESS          |  |      |     |        |          | THIS INSPECTOR MEETS THE C                            | UALI     | FICAT | ION RE  | DUIFIEMENTS IN 1   | SECTION 396.19.        |
| CITY, STATE, ZIP | CODE   | _    |     |        |          | VEHICLE IDENTIFICATION (M)                            | ND C     | OMP   | LETE [  | LIC. PLATE         | NO. VIN OTHER          |
| VEHICLE TYPE     |  | _    |     |        |          | INSPECTION AGENCY/LOCATIO                             | N (OF    | TION  | IAL)    |                    |                        |
|                  |  |      |     |        |          |   |          |       | -       |                    |                        |
| - The second     |  |      |     |        | COMPON   | NENTS INSPECTED                                       |          | -     | 100     |                    |                        |
| OK 第章 引作         | ITEM   | OK   | 影强  | * TARO |          | ITEM  | OK       | 1000  | any and |                    | ITEM                   |
|                  | <ol> <li>BRAKE SYSTEM         <ul> <li>Service Brakes</li> </ul> </li> </ol> |      |     |        |          | SYSTEM<br>able leak                                   |          |       |         | 9. FRAME           | ne Members             |
|                  | b. Parking Brake System  |      |     |        |          | el tank filler cap missing                            | $\vdash$ |       | -       |                    | and Wheel Clearance    |
|                  | c. Brake Drums or Botors   |      |     |        |          | el tank securely                                      |          |       | -       |                    | stable Axle            |
|                  | d. Brake Hose  |      |     | -      |          | ached   |          |       |         | 1 .                | mblies (Sliding        |
|                  | e. Brake Tubing  |      |     | _      |          | TING DEVICES  | 1        |       |         |                    | rames)                 |
|                  | f. Low Pressure Warning  |      |     |        | All ligh | nting devices and                                     |          |       |         | 10. TIRES          |                        |
|                  | Device   |      |     |        | reflect  | tors required by Section                              |          |       |         | a. Tires           | on any steering axle   |
|                  | g. Tractor Protection Valve  | _    |     |        |          | hall be operable.                                     |          |       |         |                    | power unit.            |
|                  | h. Air Compressor  |      |     |        |          | LOADING   |          |       |         |                    | ther tires.            |
| _                | i. Electric Brakes   |      |     |        | 1        | rt(s) of vehicle or                                   |          |       |         |                    | S AND RIMS             |
|                  | j. Hydraulic Brakes  |      |     |        |          | ndition of loading such                               |          |       |         |                    | or Side Ring           |
| -                | k. Vacuum Systems  |      |     |        |          | t the spare tire or any                               | ⊢        | -     | -       |                    | els and Rims           |
|                  | 2. COUPLING DEVICES  |      |     |        |          | rt of the load or dunnage<br>n fall onto the roadway. | $\vdash$ |       | -       | c. Fast<br>d. Weld |                        |
|                  | a. Fifth Wheels  |      |     |        |          | otection against shifting                             | ⊢        | -     | -       |                    | HIELD GLAZING          |
|                  | b. Pintle Hooks  |      |     | _      | 1        | rgo   |          |       |         |                    | ments and exceptions   |
|                  | c. Drawbar/Towbar Eye  |      |     | -      |          | RING MECHANISM  | $\vdash$ |       | -       |                    | d pertaining to any    |
|                  | d. Drawbar/Towbar Tongue   |      |     |        |          | eering Wheel Free Play                                |          |       |         |                    | iscoloration or vision |
|                  | e. Safety Devices  |      |     |        |          | ering Column  |          |       |         |                    | g matter (reference    |
|                  | f. Saddle-Mounts   |      |     |        | 1        | ont Axle Beam and All                                 |          |       |         |                    | for exceptions)        |
|                  |  |      |     |        | Ste      | eering Components                                     |          |       |         |                    | HIELD WIPERS           |
|                  | 3. EXHAUST SYSTEM  |      |     |        |          | her Than Steering                                     |          |       |         | Any pov            | ver unit that has an   |
|                  | a. Any exhaust system  |      |     |        | Co       | lumn  |          |       |         | inoperat           | tive wiper, or missing |
|                  | determined to be leaking at  |      |     |        |          | eering Gear Box                                       |          |       |         |                    | aged parts that render |
|                  | a point forward of or directly   |      |     |        |          | man Arm   |          |       |         | it ineffec         |                        |
|                  | below the driver/sleeper   |      |     |        | 4        | wer Steering  |          |       |         |                    | er condition which ma  |
|                  | compartment.   |      |     |        | -        | II and Socket Joints                                  |          |       |         |                    | e operation of this    |
|                  | b. A bus exhaust system  | _    |     |        | 1        | Rods and Drag Links                                   |          |       |         | vehicle.           |                        |
|                  | leaking or discharging to  |      |     | _      | i. Nu    |   |          |       |         |                    |                        |
|                  | the atmosphere in violation  |      |     |        |          | ering System<br>ENSION                                | 1        |       |         |                    |                        |
|                  | of standards (1), (2) or (3).<br>c. No part of the exhaust                   |      |     |        |          | y U-bolt(s), spring                                   |          |       |         |                    |                        |
|                  | system of any motor vehicle  |      |     | -      | 1        | nger(s), or other axle                                |          |       |         |                    |                        |
|                  | shall be so located as   |      |     |        |          | sitioning part(s) cracked,                            |          |       |         |                    |                        |
|                  | would be likely to result in   |      |     |        |          | oken, loose or missing                                |          |       |         |                    |                        |
|                  | burning, charring, or  |      |     |        |          | ulting in shifting of an                              |          |       |         |                    |                        |
|                  | damaging the electrical  |      |     |        |          | e from its normal position.                           |          |       |         |                    |                        |
|                  | wiring, the fuel supply, or  |      |     |        |          | ring Assembly   |          |       |         |                    |                        |
|                  | any combustible part of the  |      |     |        |          | rque, Radius or Tracking                              |          |       |         | -                  |                        |
|                  | motor vehicle.   |      |     |        | Co       | mponents.   |          |       |         |                    |                        |
| INSTRUCTIO       | INS: MARK COLUMN ENTRIES TO VERIFY   | INSP | ECT | ION:   | X OK     | X NEEDS REPAIR, NA                                    | IF       | ITE   | MS 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.

#### BRAKE INSPECTOR QUALIFICATIONS CERTIFICATE 49 C.F.R. 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 of 49 C.F.R. 396.25(d) to be responsible for the inspection, maintenance, service or repairs of any brakes on its commercial motor vehicles.

#### **Minimum Qualifications**

- Understands the brake service or inspection task to be accomplished and can perform that task; and
- Is knowledgeable of and has mastered the methods, procedures, tools and equipment used when performing an assigned brake service or inspection task; and
- □ Is capable of performing the assigned brake service or inspection by reason of experience, training or both as follows:
- I. Has successfully completed an apprenticeship program sponsored by a State, a Canadian Province, a Federal agency or a labor union, or a training program approved by a State, Provincial or Federal agency, or has a certificate from a State or Canadian Province which qualifies the person to perform the assigned brake service or inspection task (including passage of Commercial Driver's License air brake tests in the case of a brake inspection); Name, Location & Date:

or

- II. Has brake related training or experience or a combination thereof totaling at least one year. Such training or experience may consist of:
  - Participation in a training program sponsored by a brake or vehicle manufacturer or similar commercial training program designed to train students in brake maintenance or inspection similar to the assigned brake service or inspection tasks;

Name, Location & Date:

(years) experience performing brake maintenance or inspection similar to the assigned brake service or inspection task in a motor carrier maintenance program; or

Name, Location & Date:

(years) experience performing brake maintenance or inspection similar to the assigned brake service or inspection task at a commercial garage, fleet leasing company, or similar facility.

Name, Location & Date:

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

Brake Inspector's Signature

Brake Inspector's Printed Name

Date

Motor Carrier Supervisor/Employee's Signature

Motor Carrier Supervisor/Employee's Printed Name

Date

Evidence of Inspector Qualifications is on file at:

Note: This form is provided as a suggested format for documenting a brake inspector's qualifications. A motor carrier may use any format for documenting a brake inspector's qualifications which complies with 396.25.

#### **MCS-32**



# TEXAS DEPARTMENT OF PUBLIC SAFETY

MOTOR CARRIER BUREAU



#### **ELECTRONIC MAIL VERIFICATION FORM** Valid Positive Results and/or Roadside Inspection Notices

This form will be rejected if not signed by the Owner, President, or other Senior Official of the carrier, or by an individual if they are also the motor carrier.

| I,    |   | _, at,                         |                   |
|-------|---|--------------------------------|-------------------|
|       | Print Name of Individual Verifying the E-mail Address   | Telephone Number (Area Code    | & Extension)      |
| am    | Owner, President, Self, or Other (<br>Verifying Individual's Position or Title                  | specify):                      |                   |
| of    |   |                                | C                 |
| 01    | Print Name of the Company you Represent, Own, or Operate  |                                | TXDOT Number      |
| at    |   |                                | (if any)          |
| at    | Print Physical Address  | ,                              | USDOT Number      |
|       |   |                                | (if any)          |
| or    | Print Mailing Address (if different)  |                                | ,                 |
|       | n that the following electronic mail address is   | correct and is secure pursua   | ant to 49 C.F.R.  |
|       | 55(b)(2). I request (Check all that apply):   | Jan's Demontral Desitive Alask | al an Cantuallad  |
|       | esponses to requests for Release of CDL Hold<br>Substance Test Results to be sent by electronic | •                              |                   |
|       | nail address. I understand that this information  |                                |                   |
|       | thers pursuant to 49 C.F.R. 40.25 or a valid cou  | rt order.                      |                   |
|       | notification of any roadside inspections involving  | g my commercial motor vehi     | cles sent to this |
| e     | lectronic mail address.   |                                |                   |
|       |   |                                |                   |
|       | Print Electronic Mail Address   | Print Name                     |                   |
|       |   |                                |                   |
|       | Print Individual's Telephone Number   | Print Company                  |                   |
|       | e above telephone numbers do not work, you ca   | an reach us at one of the foll | owing additional  |
| telep | hone numbers:   |                                |                   |
|       | Print Additional Telephone Numbers  |                                |                   |
|       |   |                                |                   |
|       |   |                                | <u>.</u>          |
|       |   | SIGNATURE                      |                   |
| ACKI  | NOWLEDGED before me, thisday of   | , 20                           |                   |
|       |   |                                |                   |
|       |   |                                |                   |
|       |   | NOTARY PUBLIC IN AND FO        | R                 |
| My (  | Commission expires:   |                                |                   |
| Mo    | or Carrier Bureau Use Only: Date E-mail Addre   | ss VerifiedVerified by         |                   |
| Date  | CP Number CheckedIf no applicable C   | P number, new CP number issued |                   |
|       | ver or Mail this original form to the MCS   | Supervisor, Motor Carrier      |                   |
| Dep   | artment of Public Safety, 6200 Guadalupe, M   | SC# 0521, Austin, Texas 78     | 3752-4019.        |

MCS-32 (Rev 06/01/07)



Texas Highway Patrol Division Commercial Vehicle Enforcement

## **SECTION 2 – HAZARDOUS MATERIALS**

#### Do you transport hazardous materials?

Hazardous materials means a substance or material that the Secretary of Transportation has determined is capable of posing an unreasonable risk to health, safety, and property when transported in commerce, and has designated as hazardous under section 5103 of Federal hazardous materials transportation law (49 U.S.C. 5103). The term includes hazardous substances, hazardous wastes, marine pollutants, elevated temperature materials, materials designated as hazardous in the Hazardous Materials Table (see 49 CFR 172.101), and materials that meet the defining criteria for hazard classes and divisions in part 173 of this subchapter. It is important to know if you are transporting hazardous materials because violations of the HMR carry civil fines in accordance with **Appendix B to Part 386 - Penalty Schedule; Violations and Maximum Monetary Penalties**, and possible criminal penalties including up to five years in jail. Hazardous materials fall into one of the following basic classes and divisions:

| Explosives 1.1                     | Flammable Solids, 4.1          |
|------------------------------------|--------------------------------|
| Explosives 1.2                     | Spontaneously Combustible, 4.2 |
| Explosives 1.3                     | Dangerous When Wet, 4.3        |
| Explosives 1.4                     | Oxidizer, 5.1                  |
| Explosives 1.5                     | Organic Peroxide, 5.2          |
| Explosives 1.6                     | Poison Liquid or Solid, 6.1    |
| Flammable Gas, 2.1                 | Infectious Substance, 6.2      |
| Non-Flammable Gas, 2.2             | Radioactive, 7                 |
| Poison Gas, 2.3                    | Corrosive, 8                   |
| Flammable & Combustible Liquids, 3 | Miscellaneous, 9               |

Table 2-1

To determine if a material you are transporting is hazardous, contact the shipper who provided the material or see the definitions of these materials in the HMR.

#### What do I need to do if I transport hazardous material?

Intrastate motor carriers must only comply with Parts 107 (Subpart G), 171-173, 177, 178, 179 (Subpart E), and 180. Interstate motor carriers must comply with HMR, 49 CFR 100-180. These regulations include requirements including registration, training, shipping papers, labels, placards, and packages. There are additional requirements in the FMCSR, which include insurance requirements, operational restrictions, CDL endorsements, routing, parking, and attendance requirements for hazardous materials.

#### Parking (397.7)

Every motor vehicle containing hazardous materials must be driven and parked in compliance with the laws, ordinances and regulations of the jurisdiction in which it is operated unless addressed specifically by the FMCSR.

A motor vehicle containing a Division 1.1, 1.2 or 1.3 (explosive) must be attended at all times by its driver or a qualified representative of the motor carrier that operates it.

For non-Division 1.1, 1.2, or 1.3 material, a vehicle does not have to always be attended if all the following conditions exist:

- The vehicle is located on the property of a motor carrier, on the property of a shipper or consignee of the explosives, in a safe haven, or, in the case of a vehicle containing 50 pounds or less of a Division 1.1, 1.2, or 1.3 material, on a construction or survey site; and
- The lawful bailee of the explosives is aware of the nature of the explosives the vehicle contains and has been instructed in the procedures which must be followed in emergencies; and
- > The vehicle is within the bailee's unobstructed field of view or is located in a safe haven.

#### Smoking (397.13)

No person may smoke or carry a lighted cigarette, cigar, or pipe on or within 25 feet of:

- A motor vehicle which contains Class 1 material, Class 5 materials, or flammable materials classified as a Division 2.1, Class 3, Division 4.1 and 4.2; or
- An empty tank motor vehicle which has been used to transport Class 3, flammable materials or Division 2.1 flammable gases, which when used, was required to be marked or placarded in accordance with the rules in 49 CFR 177.823.

#### **Hazardous Materials Training**

No carrier may transport a hazardous material unless each hazmat employee who will operate a motor vehicle has been trained in the applicable requirements of 49 CFR parts 380, 390-397 and the procedures necessary for the safe operation of that motor vehicle.

Driver training shall include the following (177.816):

- Pre-Trip Inspection
- > Use of vehicle controls and equipment
- Operation of the vehicle
- > Procedures for maneuvering tunnels, bridges and railroad crossings
- Attendance requirements
- Parking requirements
- Smoking requirements
- Loading and unloading procedures
- Compatibility and segregation requirements
- > Specialized requirements for cargo tanks and portable tanks

Frequency and Recordkeeping (172.704)

- > Initial training Within 90 days after employment or a change in job function
- Recurrent Training Every three years
- > Recordkeeping Maintain records of all training for previous three years

#### Hazardous Materials Registration (49 CFR Part 107.601)

Carriers are required to register with the Pipeline & Hazardous Materials Safety Administration (PHMSA) if they transport in interstate or intrastate commerce:

- A hazardous material in a bulk package having a capacity equal to or greater than 3,500 gallons for liquids or gases or more than 468 cubic feet for solids
- > A quantity of hazardous material that requires placards under provisions of subpart F of part 172.

# For more PHMSA information about rules go to <u>https://www.phmsa.dot.gov/</u> or to register go to <u>https://www.phmsa.dot.gov/registration/online-registration</u>

## HAZARDOUS MATERIALS INFORMATION CENTER (HMIC) 1-800-HMR-4922 (1-800-467-4922) or (202) 366-4488 (Washington, D.C.)

https://www.phmsa.dot.gov/standards-rulemaking/hazmat/hazardous-materials-information-center

The Pipeline & Hazardous Materials Safety Administration (PHMSA) (formerly RSPA) operates the HMIC for help on use of the HMR 49 CFR Parts 100-185. The phone number is menu driven when calling from a touch-tone phone. Non-touch tone phone callers must use the telephone number (202) 366-8553. Callers will be directed through an automated menu that provides options to:

- Obtain help with use of the Hazardous Material Regulations (49 CFR Parts 100-185)
- > For information concerning hazardous materials transportation and rulemakings
- To report violations of the HMR
- > To receive recent copies of Federal Register publications or DOT special permits
- > To request copies of training materials
- > To request a formal letter of interpretation

#### Intrastate Motor Carriers: (390.3(g))

The following rules apply to motor carriers that transport hazardous materials in intrastate commerce and to the motor vehicles that transport hazardous materials in intrastate commerce.

- > Part 385, subparts A and E, for carriers subject to the requirements of 385.403 of this subchapter
- Part 386, Rules of Practice
- > Part 387, Minimum Levels of Financial Responsibility
- > Part 390, Unified Registration System and Marking of Commercial Motor Vehicles

Intrastate carriers that require HM permits must apply for a USDOT number and will be subject to a compliance review. The safety rating issued to the intrastate carrier is for the safety permit process only and unless specifically noted, will be calculated based on State violations equivalent to FMCSR list of critical and acute violations.

## Transportation Security Administration (TSA) Threat Assessments for CDL HM Endorsements

In accordance with the USA Patriot Act, the federal Transportation Security Administration (TSA) and the U.S. Department of Transportation (DOT) have adopted rules to secure the transport of hazardous materials. These rules require TSA to perform a security threat assessment on all commercial drivers who transport hazardous materials. The security threat assessment process includes collecting an individual's fingerprints and verifying US citizenship, immigration eligibility or permanent legal presence in the United States.

An individual cannot be issued a Texas commercial driver license (CDL) with a hazardous materials endorsement (HME) until the individual completes the security threat assessment and obtains clearance from TSA.

Individuals are not allowed to transfer the remaining validity period of an HME issued by another state. Since a new security threat assessment is required with a Texas CDL application, existing HME holders will be granted a 90-day temporary endorsement at the time of issuance if all other HME requirements are met.

Detailed information regarding the USA Patriot Act, including the waiver and appeal process, is available on the TSA website at <u>www.tsa.gov</u>.

#### Who must hold a Safety Permit? (Parts 385.403)

After the date following January 1, 2005, that a motor carrier is required to file a Motor Carrier Identification Report Form (MCS-150) according to the schedule set forth in §390.19(a) of this chapter, the motor carrier may not transport in interstate or intrastate commerce any of the following hazardous materials, in the quantity indicated for each, unless the motor carrier holds a safety permit:

- A highway route-controlled quantity of a Class 7 (radioactive) material, as defined in §173.403 of this title;
- More than 25 kg (55 pounds) net weight of a Division 1.1, 1.2, or 1.3 (explosive) material or articles or an amount of a Division 1.5 (explosive) material requiring placarding under part 172 of this title;
- More than one liter (1.08 quarts) per package of a "material poisonous by inhalation," as defined in §171.8 of this title, that meets the criteria for "hazard zone A," as specified in §173.116(a) or §173.133(a) of this title;
- A "material poisonous by inhalation," in a "bulk packaging," both defined in §171.8 of this title, that meets the criteria for "hazard zone B," as specified in §173.116(a) or §173.133(a);
- A "material poisonous by inhalation," as defined in §171.8 of this title, that meets the criteria for "hazard zone C," or "hazard zone D," as specified in §173.116(a) of this title, in a packaging having a capacity equal to or greater than 13,248 L (3,500) gallons; or
- A shipment of methane (compressed or refrigerated liquid), natural gas (compressed or refrigerated liquid), or any other compressed or refrigerated liquefied gas with a methane content of at least 85 percent, in a bulk packaging having a capacity equal to or greater than 13,248 L (3,500 gallons).

#### How does a motor carrier apply for a safety permit? (385.405T)

- > To apply and renew a safety permit, a motor carrier must submit a completed MCS-150B Form
- A MCS-150B Form will satisfy the requirements for obtaining or renewing a USDOT Number; there is no need to complete a MCS-150 Form
- > Forms may be obtained at http://www.fmcsa.dot.gov or by phone 1-800-832-5660
- A motor carrier must be registered with PHMSA in accordance with part 107, Subpart G, of this title
- A motor carrier holding a safety permit must report to FMCSA any change in the information on MCS-150B Form within 30 days of the change.

#### What conditions must a motor carrier satisfy for FMCSA to issue a Safety Permit (385.407)

- > Motor carrier safety performance.
  - The motor carrier must have a "Satisfactory" safety rating assigned by either FMCSA, pursuant to the Safety Fitness Procedures of this part, or the State in which the motor carrier has its principal place of business, if the State has adopted and implemented safety fitness procedures that are equivalent to the procedures in subpart A of this part; and,
  - FMCSA will not issue a safety permit to a motor carrier that:
  - Does not certify that it has a satisfactory security program as required in §385.407(b);
  - Has a crash rate in the top 30 percent of the national average as indicated in the FMCSA Motor Carrier Management Information System (MCMIS); or
  - Has a driver, vehicle, hazardous materials, or total out-of-service rate in the top 30 percent of the national average as indicated in the MCMIS.

- Satisfactory security program. The motor carrier must certify that it has a satisfactory security program, including:
  - A security plan meeting the requirements of part 172, subpart I of this title, and addressing how the carrier will ensure the security of the written route plan required by this part;
  - A communications plan that allows for contact between the commercial motor vehicle operator and the motor carrier to meet the periodic contact requirements in §385.415(c)(1); and
  - Successful completion by all hazmat employees of the security training required in §172.704(a)(4) and (a)(5) of this title.
- Registration with the Pipeline and Hazardous Materials Safety Administration (PHMSA). The motor carrier must be registered with PHMSA in accordance with part 107, subpart G of this title.

#### When may a temporary safety permit be issued to a motor carrier? (385.409)

- Temporary safety permit. If a motor carrier does not meet the criteria in §385.407(a), FMCSA may issue it a temporary safety permit. To obtain a temporary safety permit a motor carrier must certify on Form MCS–150B that it is operating in full compliance with the HMRs; with the FMCSRs, and/or comparable State regulations, whichever is applicable; and with the minimum financial responsibility requirements in part 387 of this chapter or in State regulations, whichever is applicable.
- > FMCSA will not issue a temporary safety permit to a motor carrier that:
  - Does not certify that it has a satisfactory security program as required in §385.407(b);
  - ♦ Has a crash rate in the top 30 percent of the national average as indicated in the FMCSA's MCMIS; or
  - ♦ Has a driver, vehicle, hazardous materials, or total out-of-service rate in the top 30 percent of the national average as indicated in the MCMIS.
- A temporary safety permit shall be valid for 180 days after the date of issuance or until the motor carrier is assigned a new safety rating, whichever occurs first.
  - A motor carrier that receives a Satisfactory safety rating will be issued a safety permit (see §385.421T).
  - A motor carrier that receives a less than Satisfactory safety rating is ineligible for a safety permit and will be subject to revocation of its temporary safety permit.
- If a motor carrier has not received a safety rating within the 180-day time period, FMCSA will extend the effective date of the temporary safety permit for an additional 60 days, provided the motor carrier demonstrates that it is continuing to operate in full compliance with the FMCSRs and HMRs.

# What operational requirements apply to the transportation of a hazardous material for which a permit is required? (385.415)

- Information that must be carried in the vehicle. During transportation, the following must be maintained in each commercial motor vehicle that transports a hazardous material listed in §385.403 and must be made available to an authorized official of a Federal, State, or local government agency upon request.
  - A copy of the safety permit or another document showing the permit number, provided that document clearly indicates the number is the FMCSA Safety Permit number;
  - A written route plan that meets the requirements of §397.101 of this chapter for highway route-controlled Class 7 (radioactive) materials or §397.67 of this chapter for Division 1.1, 1.2, and 1.3 (explosive) materials; and

- The telephone number, including area code or country code, of an employee of the motor carrier or representative of the motor carrier who is familiar with the routing of the permitted material. The motor carrier employee or representative must be able to verify that the shipment is within the general area for the expected route for the permitted material. The telephone number, when called, must be answered directly by the motor carrier or its representative at all times while the permitted material is in transportation including storage incidental to transportation. Answering machines are not sufficient to meet this requirement.
- Inspection of vehicle transporting Class 7 (radioactive) materials. Before a motor carrier may transport a highway route controlled quantity of a Class 7 (radioactive) material, the motor carrier must have a pre-trip inspection performed on each motor vehicle to be used to transport a highway route controlled quantity of a Class 7 (radioactive) material, in accordance with the requirements of the "North American Standard Out-of-Service Criteria and Level VI Inspection Procedures and Out-of-Service Criteria for Commercial Highway Vehicles Transporting Transuranics and Highway Route Controlled Quantities of Radioactive Materials as defined in 49 CFR Part 173.403,"
- Additional requirements. A motor carrier transporting hazardous materials requiring a permit under this part must also meet the following requirements:
  - The operator of a motor vehicle used to transport a hazardous material listed in §385.403 must follow the communications plan required in §385.407(b)(2) to make contact with the carrier at the beginning and end of each duty tour, and at the pickup and delivery of each permitted load. Contact may be by telephone, radio or via an electronic tracking or monitoring system. The motor carrier or driver must maintain a record of communications for 6 months after the initial acceptance of a shipment of hazardous material for which a safety permit is required. The record of communications must contain the name of the driver, identification of the vehicle, permitted material(s) being transported, and the date, location, and time of each contact required under this section.
  - ◆ The motor carrier should contact the Transportation Security Administration's Transportation Security Coordination Center (703–563–3236 or 703–563–3237) at any time the motor carrier suspects its shipment of a hazardous material listed in §385.403 is lost, stolen or otherwise unaccounted for.

### How long is a safety permit effective? (385.419)

Unless suspended or revoked, a safety permit (other than a temporary safety permit) is effective for two years, except that:

- A safety permit will be subject to revocation if a motor carrier fails to submit a renewal application (Form MCS-150B) in accordance with the schedule set forth for filing Form MCS-150 in §390.19(a) of this chapter; and
- An existing safety permit will remain in effect pending FMCSA's processing of an application for renewal if a motor carrier submits the required application (Form MS-150B) in accordance with the schedule set forth in §390.19(a)(2) and (a)(3) of this chapter.

# Under what circumstances will a safety permit be subject to revocation or suspension by FMCSA? (385.421T)

A safety permit will be subject to revocation or suspension by FMCSA for the following reasons:

- A motor carrier fails to submit a renewal application (Form MCS–150B) in accordance with the schedule set forth in §390.19T(a)(2) and (3) of this chapter;
- A motor carrier provides any false or misleading information on its application (Form MCS– 150B), or as part of updated information it is providing on Form MCS–150B (see §385.405T(d));
- > A motor carrier is issued a final safety rating that is less than Satisfactory;

- A motor carrier fails to maintain a satisfactory security plan as set forth in §385.407(b);
- A motor carrier fails to comply with applicable requirements in the FMCSRs, the HMRs, or compatible State requirements governing the transportation of hazardous materials, in a manner showing that the motor carrier is not fit to transport the hazardous materials listed in §385.403;
- > A motor carrier fails to comply with an out-of-service order;
- A motor carrier fails to comply with any other order issued under the FMCSRs, the HMRs, or compatible State requirements governing the transportation of hazardous materials, in a manner showing that the motor carrier is not fit to transport the hazardous materials listed in §385.403;
- A motor carrier fails to maintain the minimum financial responsibility required by §387.9 of this chapter or an applicable State requirement;
- A motor carrier fails to maintain current hazardous materials registration with the Pipeline and Hazardous Materials Safety Administration; or
- A motor carrier loses its operating rights or has its registration suspended in accordance with §386.83 or §386.84 of this chapter for failure to pay a civil penalty or abide by a payment plan.

Determining whether a safety permit is revoked or suspended. A motor carrier's safety permit will be suspended the first time any of the conditions specified in paragraph (a) of this section are found to apply to the motor carrier. A motor carrier's safety permit will be revoked if any of the conditions specified in paragraph (a) of this section are found to apply to the motor carrier and the carrier's safety permit has been suspended in the past for any of the reasons specified in paragraph (a) of this section.

Effective date of suspension or revocation. A suspension or revocation of a safety permit is effective:

- Immediately after FMCSA determines that an imminent hazard exists, after FMCSA issues a final safety rating that is less than Satisfactory, or after a motor carrier loses its operating rights or has its registration suspended for failure to pay a civil penalty or abide by a payment plan;
- Thirty (30) days after service of a written notification that FMCSA proposes to suspend or revoke a safety permit, if the motor carrier does not submit a written request for administrative review within that time period; or
- As specified in §385.423(c), when the motor carrier submits a written request for administrative review of FMCSA's proposal to suspend or revoke a safety permit.
- A motor carrier whose safety permit has been revoked will not be issued a replacement safety permit or temporary safety permit for 365 days from the time of revocation.



# **Inspection Procedure**

North American Standard Hazardous Materials/Dangerous Goods

For more detailed information, see the procedures contained in the CVSA Operations Manual.

# Initiate the Inspection

- As the vehicle is approached for inspection, follow all safety precautions.
- Do a complete walk-around of the vehicle and check for placards, leaks and general vehicle condition.
- Shipping papers and emergency response information must be within the driver's immediate reach when restrained by the lap belt and visible to the person entering the vehicle, or in a holder mounted on the inside of the driver's door.

#### 2 Check the Shipping Paper(s) for Compliance

- The presence of hazardous materials/ dangerous goods (HM/DG) on the shipping paper that also contains non-hazardous freight must be one of the following:
  - Entered first (and under the DG heading for Canada only)
  - Entered in contrasting color -
  - Identified with an "X" in the HM/DG column
  - Identified by an "RQ" in the HM column, \_ if a reportable quantity of a hazardous substance identified in Appendix A is being transported (U.S. only)
- Shipments of hazardous waste that are required to be manifested must be accompanied by a Hazardous Waste Manifest. The manifest may meet the requirements of the shipping paper.
- Verify compliance of the proper shipping name.
- Check 172.101, Appendix A, to see if the material is a hazardous substance. Hazardous substances are regulated by all modes. (U.S. only)
- Check 172.101, Appendix B, to see if the material is a marine pollutant. Only bulk packages containing marine pollutants are subject to the regulations when transported by highway. Refer to 171.4 for marine pollutant exceptions. (U.S. only)
- Refer to 172.101 Table, Column 1, for the . presence of a symbol when determining which entry to use for the proper shipping name. (U.S. only)
- Verify that the hazard class/division entered on the shipping paper corresponds with the proper shipping

name and subsidiary hazards in parentheses.

- Verify that the identification (ID) number and packing group entered on the shipping paper correspond with the proper shipping name.
- Verify that the total quantity and unit of measure is entered on the shipping paper.
- Verify that the number and type of packages are entered on the shipping paper.
- Verify that the HM/DG basic description appears on the shipping paper in the proper sequence:
  - ID number
  - Proper shipping name
  - Hazard class/division
  - Packing group, if applicable
- Always refer to special provisions when inspecting a shipping paper and check for additional entries that may be applicable to the shipment.
- Recognize when exceptions to the shipping paper requirement apply.
- Verify that the emergency response telephone number is entered on the shipping paper in the proper manner.
- Verify that the words "24 hour number" or an abbreviation of those words, followed by the phone number, are entered on the shipping paper in the proper manner. (Canada only)
- Verify that the emergency response information, as appropriate, accompanies the shipment. (U.S. only)
- Verify that the Emergency Response Assistance Plan (ERAP) number and activation telephone number are entered on the shipping paper. (Canada only)
- Verify that the consignor certification and name of the individual who made the certification are entered on the shipping paper. (Canada only)

# 3 Check for Placarding Compliance

- Check for exceptions that may apply to the placarding requirements for the HM/DG shipment.
- Placarding of Table 1 materials is required for any quantity.

- · Placarding of Table 2 materials is required for 1,001 lbs. (454 kg.) or more.
- When HM/DG is offered for transportation in bulk packaging/large means of containment, appropriate placards must be displayed, unless specific conditions have been met.
- Verify the proper display of any required subsidiary hazard placards.
- Verify that placards meet general specifications.
- Verify the required placards are displayed and meet visibility requirements on a transport vehicle.

# 4 Check Marking Compliance

- Use the shipping papers to determine the HM/DG being transported and the quantity of HM/DG. Determine if the shipment is a bulk or non-bulk shipment.
- Verify display of the ID number(s) on bulk packages/large means of containment in one of the three acceptable manners: placards, orange panels or plain white square on point displays.
- Check transport vehicle for display of ID numbers when transporting large quantities of a single HM/DG in non-bulk packages/small means of containment.
- If no ID number is displayed on a bulk package/large means of containment, verify if this is appropriate for the shipment using the prohibited display and special provision sections.
- Verify additional marking requirements that apply to portable tanks, cargo tanks and multi-unit tank car tanks.
- Verify that markings on packages conform to set size standards and specifications.
- Verify that packages are marked on at least one side or end of the package, as required.
- Determine if the package is subject to a U.S. DOT special permit requiring that it be marked with "DOT-SP" followed by the applicable permit number.
- If the shipment is being transported as per a Transport Canada (TC) equivalency certificate, the shipment must be compliant with the equivalency certificate's conditions and the Transportation of Dangerous Goods (TDG) Regulations.

- Verify that required basic markings are on all non-bulk packages/small means of containment.
- When the shipping papers reveal the following HM/DG, check for additional marking requirements that may apply:
  - PIH materials
  - Hazardous substances
  - Orientation arrows
  - ORM-D
  - Explosive package requirements
  - Toxic/Poison package markings
  - Infectious substances
  - Radioactive material
  - Marine pollutant
  - Limited quantity
- Verify that the location of the marking is appropriate.

### 5 Check Labeling Compliance

- Begin inspection of labeling compliance with the shipping papers in hand, using the shipping papers to determine the HM/DG being transported.
- Observe labels (if any) that are present on the package. When labels are specified for the package but are not present on the package, check for exceptions to labeling requirements that may apply.
- Verify that labels are properly located on the package. Check for multiple and duplicate labeling, as appropriate.
- Verify that the required label specifications are met for all displayed labels.

#### 6 Check Packaging Compliance

• Use the shipping papers to determine the HM/DG being transported. Refer to special provisions that may apply to packaging regulations for that material.

- Identify the type of packaging used and determine if the packaging is appropriate for the HM/DG it contains, and is not leaking.
- Determine if a U.S. DOT exception applies to the packaging. (U.S. only)

#### 7 Check Loading Compliance

- Observe the general securement of the HM/DG being transported. Verify the packages are in compliance with the blocking, bracing and securement requirements of the regulations.
- Verify segregation, separation and compatibility for the HM/DG being transported.
- Determine if more stringent regulations apply for the subsidiary hazard of the HM. (U.S. only)

# Hazardous Materials of Trade Checklist

| ITEM  | Y | N | NA | RATE LIMIT   | Y | N | NA |
|---|---|---|----|--|---|---|----|
| Class/Division Limits [173.6(a)]                                      |   |   |    | Packaging [173.6(b)]                                       |   |   |    |
| Division 2.1  |   |   |    | Leak tight / Sift proof / Securely closed                  |   |   |    |
| Division 2.2  |   |   |    | Secured against movement / Protected                       |   |   |    |
| Division 2.2, ASME ≤ 70 gallons                                       |   |   |    | Original package or equivalent                             |   |   |    |
| Class 3   |   |   |    | Single package secured in cage, box, bin, compartment      |   |   |    |
| Division 4.1  |   |   |    | Gasoline [173.6(b)(4)]                                     |   |   |    |
| Division 4.3, PG II or III, $\leq$ 1 oz.                              |   |   |    | Plastic or metal (no glass)                                |   |   |    |
| Division 5.1  |   |   |    | Plastic (UL/FM): 1 quart or less per 29 CFR 1910.106(d)(2) |   |   |    |
| Division 5.2  |   |   |    | Metal (UL/FM): 5 gallons or less per 29 1910.106(d)(2)     |   |   |    |
| Division 6.1  |   |   |    | Safety can: 5 gallons or less per 29 CFR 1926.152          |   |   |    |
| Division 6.2, not Category A infectious substances (see other limits) |   |   |    | UN specification container: 8 gallons or less              |   |   |    |
| Class 8   |   |   |    | Cylinders [173.6(b)(5)]                                    |   |   |    |
| Class 9   |   |   |    | Division 2.1 or 2.2  |   |   |    |
| ORM-D   |   |   |    | Outer packaging not required                               |   |   |    |
| 3, 4.1, 5.1, 5.2, 6.1, 8, 9, ORM-D Non-Bulk Limits                    |   |   |    | Valves tightly closed                                      |   |   |    |
| PG I ≤ 1 lb. solid / 1 pint liquid                                    |   |   |    | Hazard Communication [173.6(c)]                            |   |   |    |
| PG II / III / ORM-D ≤ 66 lbs.   |   |   |    | Common name or PSN marking                                 |   |   |    |
| Class 9 Bulk Limits   |   |   |    | RQ, if applicable  |   |   |    |
| 400 gallons ≤ 2 percent concentration                                 |   |   |    | Bulk Class 9 ID number marking                             |   |   |    |
| Div 6.2 Limits [173.6(a)(4)]  |   |   |    | Cylinder marking/labeling                                  |   |   |    |
| Diagnostic / Biological package limits                                |   |   |    | Driver Requirements  |   |   |    |
| Regulated medical waste limits  |   |   |    | Driver informed of HM / RQ                                 |   |   |    |
| Self-Reactive or TIH / PIH or Hazardous Waste                         |   |   |    | Driver informed of 173.6 requirements                      |   |   |    |
| Self–Reactive / TIH / HW not eligible for MOT                         |   |   |    | Aggregate Volume Limit                                     |   |   |    |
|   |   |   |    | Aggregate gross weight ≤ 440 lbs.                          |   |   |    |

Class 9 Tank  $\leq$  400 gallons

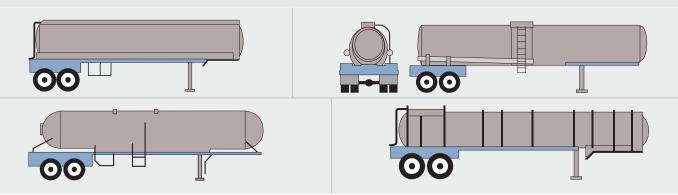
# www.cvsa.org



# **Inspection Procedure**

North American Standard Cargo Tank and Other Bulk Packagings

For more detailed information, see the procedures contained in the CVSA Operations Manual.



# Initiate the Inspection

- As the vehicle is approached for inspection, follow all safety precautions.
- Do a complete walk-around of the vehicle and check for placards, leaks and general vehicle condition.
- Shipping papers and emergency response information must be within the driver's immediate reach when restrained by the lap belt and visible to the person entering the vehicle, or in a holder mounted on the inside of the driver's door.

#### Check the Shipping Paper(s) for Compliance

- The presence of hazardous materials/ dangerous goods (HM/DG) on the shipping paper that also contains non-hazardous freight must be one of the following:
  - Entered first (and under the DG heading for Canada only)
  - Entered in contrasting color
  - Identified with an "X" in the HM/DG column
  - Identified by an "RQ" in the HM column, if a reportable quantity of a hazardous substance identified in Appendix A is being transported (U.S. only)
- Shipments of hazardous waste that are required to be manifested must be accompanied by a Hazardous Waste Manifest. The manifest may meet the requirements of the shipping paper.
- Verify compliance of the proper shipping name.
- Check 172.101, Appendix A, to see if the material is a hazardous substance. Hazardous substances are regulated by all modes. (U.S. only)

- Check 172.101, Appendix B, to see if the material is a marine pollutant. Only bulk packages containing marine pollutants are subject to the regulations when transported by highway. Refer to 171.4 for marine pollutants. (U.S. only)
- Refer to the 172.101 Table, Column 1, for the presence of a symbol when determining which entry to use for the proper shipping name. (U.S. only)
- Verify that the hazard class/division entered on the shipping paper corresponds with the proper shipping name and subsidiary hazards in parentheses.
- Verify that the identification (ID) number and packing group entered on the shipping paper correspond with the proper shipping name.
- Verify that the total quantity and unit of measure is entered on the shipping paper.
- Verify that the number and type of packages are entered on the shipping paper.
- Verify that the HM/DG basic description appears on the shipping paper in the proper sequence:
  - ID number
  - Proper shipping name
  - Hazard class/division
- Packing group, if applicable
- Always refer to special provisions when inspecting a shipping paper and check for additional entries that may be applicable to the shipment.
- Recognize when exceptions to the shipping paper requirement apply.
- Verify that the emergency response telephone number is entered on the shipping paper in the proper manner.

- Verify that the words "24 hour number" or an abbreviation of those words, followed by the phone number, are entered on the shipping paper in the proper manner. (Canada only)
- Verify that the emergency response information, as appropriate, accompanies the shipment. (U.S. only)
- Verify that the Emergency Response Assistance Plan (ERAP) number and activation telephone number are entered on the shipping paper. (Canada only)
- Verify that the consignor certification and name of the individual who made the certification are entered on the shipping paper. (Canada only)

#### **Check for Placarding Compliance**

- Check for exceptions that may apply to the placarding requirements for the HM/DG shipment.
- Placarding is required for any quantity of a HM/DG in a bulk package/large means of containment.
- When HM/DG is offered for transportation in bulk packaging/large means of containment, appropriate placards must be displayed, unless specific conditions have been met.
- Verify the proper display of any required subsidiary hazard placards.
- Verify that placards meet general specifications.
- Verify the required placards are displayed and meet visibility requirements on a transport vehicle.

#### **Check Marking Compliance**

- Use the shipping papers to determine the HM/DG being transported and the quantity of HM/DG.
- Verify display of the ID number(s) on the bulk package/large means of containment in one of the three acceptable manners: placards, orange panels or plain white square on point displays.
- If no ID number is displayed on a bulk package/large means of containment, verify if this is appropriate for that shipment using the prohibited display and special provision sections.
- Verify additional marking requirements that apply to portable tanks, cargo tanks and multi-unit tank car tanks.
- Verify that markings on the package conform to set size standards and specifications.
- Determine if the package is subject to a U.S. DOT special permit requiring that it be marked with "DOT-SP" followed by the special permit number.
- If the shipment is being transported as per a Transport Canada (TC) equivalency certificate, the shipment must be compliant with the equivalency certificate's conditions and the Transportation of Dangerous Goods (TDG) Regulations.
- When the shipping papers reveal the following HM/DG, check for additional marking requirements that may apply:
  - PIH materials
  - Elevated temperature materials
  - Marine pollutants
  - Infectious substances
  - Petroleum sour crude oil
- Verify that the location of the marking is appropriate.

#### **Check Labeling Compliance**

- Begin inspection of labeling compliance with the shipping papers in hand, using the shipping papers to determine the HM/DG being transported.
- Observe labels (if any) that are present on the package. When labels are specified for the package but are not present, check for exceptions to labeling requirements that may apply.
- Verify that labels are properly located on the package. Check for multiple and duplicate labeling, as appropriate.
- Verify that the required label specifications are met for all displayed labels.

#### **Check Packaging Compliance**

 Use the shipping papers to determine the HM/DG being transported. Refer to special provisions that may apply to packaging regulations for that material.

- Identify the type of packaging used and determine if the packaging is appropriate for the HM/DG it contains, and is not leaking.
- Determine if a U.S. DOT exception applies to the packaging. (U.S. only)

#### Check Loading Compliance

- Observe the general securement of the HM/DG being transported. Verify compliance with the blocking and bracing requirements of cargo.
- Verify segregation, separation and compatibility for the HM/DG being transported.
- Determine if more stringent regulations apply for the subsidiary hazard of the HM. (U.S. only)

#### **Package Authorization**

 Verify that the bulk package/large means of containment is authorized under regulations for the product being transported, including any testing or inspection standards.

### 2 Check for Specification Marking

 Examine package for specification marking, attachment, location of specification marking and other required information.

### Inspect Test Date Markings

- Verify test date markings on bulk packages/large means of containment for:
  - Location
  - Size
  - Legibility and durability
  - Appropriate test date for package

#### 4 Inspect Securement and Integrity

 Inspect the bulk package/large means of containment for proper securement and integrity, including supports, anchoring and ring stiffeners (if applicable).

**Note:** If the cargo tank is constructed with external ring stiffeners with an air space, check to see that a drainage hole has been provided and is open.

#### 5 Inspect Double Bulkhead Drains

 Void spaces in double bulkheads are required to be vented and must be equipped with drainage which must be operative at all times.

**Caution:** If bottom drain is plugged, do not remove.

#### 6 Inspect Piping and Protection

- Check for shear sections, sacrificial devices or suitable guards, when applicable.
- Check for minimum road clearance, when applicable.
- Ensure that piping is free of leaks.

#### 7 Inspect Emergency Flow Control Devices

- Inspect internal valves and other closures, as applicable. Requirements for valves may differ depending upon specification and commodity.
- Inspect emergency flow control devices including:
  - Remote control devices and required markings
  - Automatic heat-actuated devices
  - One-way or excessive flow valves
- Inspect inlet/outlet markings (if applicable).
  - Caution: Do not open valves or closures.

#### 8 Inspect Rear End Protection

• Inspect rear end protection and rear bumper.

#### 9 Check Optional Inspection Items

- The following inspection items are located on the top of cargo tanks and inspection of these items will be dependent upon the operating policies of individual agencies:
  - Manhole assemblies
  - Pressure relief devices
  - Overturn protection

### 10 Apply CVSA Decal

- When a U.S. DOT/TC specification cargo tank inspection is completed in conjunction with the North American Standard Level I and/or Level V Inspection, CVSA decals shall not be issued to U.S. DOT/TC specification cargo tank vehicles found to have violations of the following:
- Retest requirements
- Cargo tank authorization (Does not include specification shortages)
- Manhole covers
- Internal valves
- Discharge valves
- Cargo tank integrity
- Supports and anchoring
- Double bulkhead drains
- Ring stiffeners
- Rear-end protection
- Emergency flow control
- Piping and protection
- Overturn Protection
- Venting
- CVSA decal(s) shall only be applied to U.S. DOT/TC specification cargo tanks by CVSAcertified cargo tank inspectors.
- The location for a CVSA decal on a cargo tank semi-trailer shall be at eye-level near the right front of the cargo tank and on the lower right corner of the exterior surface of the passenger's windshield of a straight truck.



Texas Highway Patrol Division Commercial Vehicle Enforcement

# **SECTION 3 – CARRIERS OF PASSENGERS**

Historically, the predecessor agencies of the FMCSA only regulated "for-hire" transportation of passengers with a vehicle designed to transport more than 15 passengers, including the driver.

Private motor carriers of passengers (PMCPs) became subject to the FMCSRs on January 1, 1995. They are separated into two groups (business or non-business) and are exempt from certain requirements of the FMCSRs.

Motor carriers operating vehicles designed or used to transport 9 to 15 passengers (including the driver) for compensation became subject to three regulatory standards on February 12, 2001.

**Effective November 10, 2003:** The definition of a CMV now includes "Small Passenger" carrying vehicles. Motor carriers operating CMVs designed or used to transport 9 to 15 passengers (including the driver), in interstate commerce must comply with FMCSR Parts 390 through 396 when they are directly compensated for such services; or designed or used to transport 16 or more passengers (including the driver), and is not used to transport passengers for compensation. The drivers and vehicles operated by motor carriers in transporting 9 to 15 passengers (including the driver) for direct compensation are subject to the same safety requirements imposed upon motor coach operations with the exception of the commercial driver's license, controlled substance and alcohol testing regulations. Motor carriers operating CMVs designed or used to transport 9 to 15 passengers (including the driver), not for direct compensation, provided the vehicle does not otherwise meet the definition of a commercial motor vehicle are subject only to FMCSR Parts 390.15, 390.19 390.21(a) and 390.21(b)(2), 391.15(f), 392.80 and 392.82

Although the interstate Hours of Service Requirements for motor carriers of property changed on January 4, 2004 and again on October 1, 2005: The hours of service requirements for motor carriers of <u>passengers</u> will remain as they have been in been in the past. Drivers may drive no longer than 10 hours without 8 consecutive hours off duty or sleeper berth time if equipped with sleeper berth meeting the requirements as defined by FMCSR 393.76. Sleeper berth and off duty time can be combined to acquire the 8 consecutive hours and the sleeper berth time can be split to obtain the required 8 hours. Drivers cannot drive after 15 hours total combined time of "on duty not driving" and "driving time" without 8 consecutive hours off duty/sleeper berth time.

Note: Intrastate hours of service rules in Texas are the same for motor carriers of both property and passengers (37 TAC 4.12).

# **Types of Motor Carriers of Passengers**

# **For-hire Carriers**

Three factors must be present before a motor carrier of passengers is classified as a "for-hire" carrier:

- 1. The motor carrier provides interstate transportation of passengers for a commercial purpose;
- 2. The motor carrier is compensated, either directly or indirectly, for the transportation service provided; and
- 3. The transportation service is generally available to the public at large.

Examples of for-hire transportation of passengers include inter-city bus service, charter bus service, canoe rental company bus service, and hotel bus service.

# **Business PMCPs**

Business PMCPs provide private interstate and/or intrastate transportation of passengers in the furtherance of a commercial purpose. These include companies that use buses to transport their own employees and professional musicians who use buses for concert tours. Commercial businesses that provide passenger transportation to the general public are not business PMCPs. They are considered "For-hire" and are already subject to the FMCSRs.

# **Non-business PMCPs**

Non-business PMCPs provide private, interstate and/or intrastate transportation of passengers that is not in the furtherance of a commercial purpose. These include churches, private schools, scout groups, and other charitable organizations that may purchase or lease buses for the private transportation of their respective groups.

Churches, other charitable organizations, or private associations, that offer charter bus service to the general public with the intent to make a profit are not Non-business PMCPs. They are considered "Forhire" and are already subject to the FMCSRs.

# **Applicability of FMCSRs**

| PART | REGULATORY TOPIC                                  | APPLICABLE |
|------|---|------------|
| 382  | Controlled Substances and Alcohol Use and Testing | Yes        |
| 383  | Commercial Driver's License                       | Yes        |
| 387  | Financial Responsibility (Insurance/Surety)       | No         |
| 390  | General Applicability & Definitions               | Yes        |
| 391  | Qualifications of Drivers                         | Partial    |
| 392  | Driving of Commercial Motor Vehicles              | Yes        |
| 393  | Parts and Accessories                             | Yes        |
| 395  | Driver's Hours of Service                         | Yes        |
| 396  | Inspection, Repair and Maintenance                | Yes        |

# Table 3-1 - FMCSRs Applicable to Business PMCPs

Exemptions – Business PMCPs are not subject to:

- > Minimum levels of financial responsibility
- Road test requirements of Part 391
- Refer to 391.69

| PART | REGULATORY TOPIC                                  | APPLICABLE |
|------|---|------------|
| 382  | Controlled Substances and Alcohol Use and Testing | Yes        |
| 383  | Commercial Driver's License                       | Yes        |
| 387  | Financial Responsibility (Insurance/Surety)       | No         |
| 390  | General Applicability & Definitions               | Partial    |
| 391  | Qualifications of Drivers                         | Partial    |
| 392  | Driving of Commercial Motor Vehicles              | Yes        |
| 393  | Parts and Accessories                             | Yes        |
| 395  | Driver's Hours of Service                         | Partial    |
| 396  | Inspection, Repair and Maintenance                | Partial    |

# Table 3-2 FMCSRs Applicable to Non-Business PMCPs

**Exemptions –** Non-business PMCPs are not subject to:

- > Minimum levels of financial responsibility
- Subpart C of Part 391
- Subpart D of Part 391
- Subpart F of Part 391
- Most paper work and record-keeping requirements of Parts 390, 391, 395, and 396.

# **Financial Responsibility For Motor Carriers Of Passengers**

49 CFR Part 387, Subpart B outlines minimum levels of financial responsibility (insurance) applicable to "for-hire" carriers transporting passengers in interstate commerce.

The following chart summarizes the applicability of the minimum levels of financial responsibility regulations to passenger carriers.

| Size of Vehicle                               | "For-hire"<br>Passenger Carrier            | Business<br>PCMPs | Non-business<br>PCMPs |
|---|--|-------------------|-----------------------|
| Vehicle with a seating capacity of 16 or more | \$5,000,000 insurance<br>coverage required | Not Subject       | Not Subject           |
| Vehicle with a seating capacity of 15 or less | \$1,500,000 insurance coverage required    | Not Subject       | Not Subject           |

### Table 3-3

**Exemptions –** Minimum Financial Responsibility Regulations do not apply to:

- > A motor vehicle transporting only school children and teachers to and from school
- A motor vehicle providing taxicab service, having a seating capacity of less than 7 passengers, and not operating on a regular route or between specified points
- A motor vehicle carrying less than 16 individuals in a single daily round trip to commute to and from work

# **Frequently Asked Questions**

1. Are PMCPs required to mark their vehicles in accordance with 49 CFR Part 390.21? Yes.

## 2. Are non-business PMCP drivers required to be medically examined?

No. Section 391.68(c) specifically states that much of Sections 391.41 and 391.45, which require a driver to be medically examined and to have a medical examiner's certificate on his/her person, do not apply to non-business PMCPs. However, non-business PMCP drivers are subject to the minimum physical qualification standards found in Section 391.41 (b) (1)-(13).

Non-business PMCPs should become familiar with the minimum physical qualification standards found in Section 391.41 and the driver waiver conditions of Section 391.49.

Non-business PMCP drivers may be placed out-of-service during terminal, en route, or destination inspections if they are required by Section 391.41 to have a waiver and do not possess one.

3. Are non-business PMCP drivers subject to the driver's hours of service regulations? Yes. However, they are not required to prepare or maintain records of duty status. Non-business PMCP driver's hours of service will be evaluated by enforcement officers during terminal, en route, and destination inspections based on evidence available at the inspection location.

It is recognized that some individuals who volunteer to drive for non-business PMCPs may also drive for other motor carriers and in that capacity are required to maintain a record of duty status. All on-duty time performed for a non-business PMCP must be recorded on the records of duty-status submitted to that driver's regularly employing motor carrier.

4. Are non-business PMCPs required to have their vehicles inspected? Yes. In accordance with Section 396.17.

# Applicability of the FMCSRs to School Bus Transportation

| Entity Type  | School To Home or<br>Home to School | Extracurricular School<br>Activities |
|--|-------------------------------------|--------------------------------------|
| Public School Transporting Students  | Not Subject                         | Not Subject                          |
| Private School Transporting Pre-Primary,<br>Primary and Secondary Students         | Not Subject                         | Subject as Non-Business<br>PMCP's    |
| Private School Transporting<br>Post-Secondary Students                             | Subject as Non-<br>Business PMCP's  | Subject as Non-Business<br>PMCP's    |
| "For Hire" Contractors Transporting<br>Pre-Primary, Primary and Secondary Students | Not Subject                         | Subject as "For Hire<br>Carriers"    |
| "For Hire" Contractors Transporting<br>Post-Secondary Students                     | Subject as "For Hire<br>Carriers"   | Subject as "For Hire<br>Carriers"    |

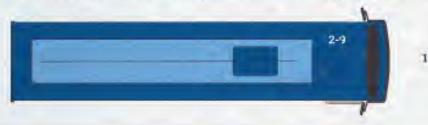
#### Table 3-4

### Passenger Vehicle Inspection Procedure

# Inspection Procedure North American Standard Passenger Carrier Vehicle

North American Standard Passenger Garrier Venic

# For more detailed information, see the written procedures contained in the CVSA Operations Manual.



Jurisdictions should adopt safety procedures based on the number of inspectors present. Multiple inspectors are recommended when using inspection ramps. Steps are marked with "Team Leader" for use during a two or three-person inspection. The team leader should determine at what step to position the passenger carrier vehicle over the inspection pit or on inspection ramps. If an inspection pit is used, ignore references to inspection ramps. When conducting a North American Standard (NAS) Level V Vehicle-Only Inspection, begin with step 10. When conducting a NAS Level II Walk-Around Driver/Vehicle Inspection, omit steps 16 through 18. Ignore the areas referring to passengers when none are present.

#### Inspection Preparation (Team Leader)

 Select vehicle and direct it to the inspection location.

CONCLE SAREA

 Gather preliminary information from the vehicle for the inspection report, including the license plate number and state/ province/territory and country, company name as shown on the vehicle, company number, appropriate DOT, PUC/PSC identifiers, etc., and the time the inspection began. Verify the company operator, not the tour company or leasing company.

Note: Communication is paramount between the inspector(s) and the driver.

#### Greet and Prepare the Driver and Passengers (Team Leader)

- Identify yourself.
- Explain the inspection procedure.
- · Ensure engine is off.
- Check driver's seat, seat belt usage and condition.
- Observe the driver's overall condition for illness, fatigue or other signs of impairment.
- Check for illegal presence of alcohol, drugs, radar detector, weapons or other contraband.
- If passengers are present, explain the purpose of the inspection and how it will be conducted.

#### Collect Driver's Documents (Team Leader)

- Collect commercial driver's license (CDL) and record of duty status.
- Collect Medical Examiner's Certificate and Skill Performance Evaluation (SPE) Certificate (If applicable).
- Collect periodic inspection certificates, CVIP.
- Collect supporting documents: bills of lading, receipts, other documents, used to verify record of duty status, trip information, tour itinerary, trip envelope and charter order.

#### Interview the Driver (Team Leader)

- Ask the driver for starting location, final destination, load description, time traveled, most recent stop and fueling location(s).
- Ask the driver what other jobs he/she has worked in the past week (many drivers are part time).
- Check for presence of hazardous materials/dangerous goods.

#### Identify the Carrier (Team Leader)

- Identify carrier by using vehicle identification, vehicle registration, insurance and driver interview.
- Check interline agreements/operating authority.

- Examine Commercial Driver's License (Team Leader)
- Check the expiration date, class, endorsements, restrictions and status.
- Check Medical Examiner's Certificate and Skills Performance Evaluation (SPE) Certificate (If Applicable) (Team Leader)
- Check certificate(s) date, which may be valid for up to 24 months.
- Check corrective lens requirement.
- Check hearing ald requirement.
- Check physical limitations.

Note: The medical qualifications may be contained in the driver's license. Proper class indicates adequate medical requirements.

# Check Record of Duty Status (Team Leader)

- Check hours of service verification.
- Check accuracy of record.

#### Review Vehicle Inspection Reports (Team Leader)

- Check driver's daily vehicle inspection report (if applicable).
- Review the vehicle inspection report to verify that listed safety defects have been certified as corrected.

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### Passenger Vehicle Inspection Procedure- Page 2



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# **Bus/Motorcoach Emergency Exit Inspection Record**

#### BUS/MOTORCOACH EMERGENCY EXITS INSPECTION Under 49 C.F.R. 396.3

|                         | VEHICLE IDENTIFICATION |
|-------------------------|------------------------|
| Make                    | Serial Number          |
| Year                    | Tire Size              |
| Company Number/Other ID | Owner (if leased)      |

|      | Operations Inspected     |                          |   |       |  |
|------|--------------------------|--------------------------|---|-------|--|
| Date | CHECK PUSHOUT<br>WINDOWS | CHECK EMERGENCY<br>DOORS | CHECK EMERGENCY<br>DOOR MARKING<br>LIGHTS | OTHER |  |
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Note: This form is provided as a suggested format for documenting a bus or motorcoach emergency exits inspection. A motor carrier may use any format for tracking a vehicle's inspections which complies with 396.3.

Page\_\_\_\_of \_\_\_\_

Documenting Operations from \_\_\_\_\_(date) to \_\_\_\_\_(date)



Texas Highway Patrol Division Commercial Vehicle Enforcement

# **SECTION 4 – DOCUMENT RETENTION**

# Parts 40 & 382 Drug & Alcohol Testing:

382.405 - records must be kept in a secure location to prevent unauthorized release.

40.333 and 382.401 – records must be kept for specific minimum periods of time:

## Five Years

- > Records of any alcohol tests indicating an alcohol concentration of 0.02 or more
- Verified Positive Results for controlled substances tests
- > Documentation of refusals to take test including substituted or adulterated test
- > Driver evaluation and referrals relating to Substance Abuse Professional reports
- > All follow up test and schedules for follow up testing (40.333 and 40.311(h))
- Calibration Documentation
- > Records related to the Administration of Drug and Alcohol testing programs
- Any year USDOT requests a summary of annual testing under 382.403, a copy of the annual calendar year summary provided to USDOT

<u>Three Years</u> – Alcohol and controlled substances records obtained from previous employers under 40.25 or 391.53(c)

<u>**Two Years**</u> – Records related to the alcohol and controlled substances testing process (except calibration documentation, which must be kept for five years)

<u>One Year</u> – Records of negative and cancelled controlled substances test results, and alcohol test results with a concentration of less than 0.02

**Indefinite** – 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 two years after ceasing to perform those functions.

# 382.403 – Survey Reports

Every year, the Federal Motor Carrier Safety Administration will survey a small percentage of regulated motor carriers for statistical analysis of the effectiveness and scope of the drug and alcohol testing program. FMCSA maintains the results of these surveys in a "management information system." If you are contacted by FMCSA to provide this information, you must do so. You must also maintain copies of information you provide for five years (See the five year rule under 382.401).

# 382.405 & Part 40, Subpart P (Sections 40.321 to 40.333) – Access & confidentiality

For the most part, records pertaining to a driver's participation in drug and alcohol testing are confidential and must be kept in a secure location. A driver is entitled to copies of records the employer maintains about that driver's participation in alcohol and drug testing. When a driver signs a release to a future employer or someone else, the person holding the release is entitled to copies of those records as well. If the driver is seeking unemployment insurance, workers' compensation, or other benefits in a lawsuit or other forum and the drivers' confidential records are relevant to the proceeding, the employer may provide these records to that forum. Certain government entities are entitled to such records. The rules on this are long and specific. Please read these regulations before providing or withholding access to these types of records.

# Part 387

387.7, 387.31 – Certain motor carriers are required to have specific motor carrier insurance. Documentation requirements fall under the following subsections. Proof of current insurance must be

- (d) maintained at the carrier's principal place of business,
- (e) provided to the public upon reasonable request as it is public information, and
- (f) maintained on each vehicle being operated.

Be aware that although the regulation does not require proof of expired/replaced insurance policies, most policies provide for a time period by which claims can be made on that policy. It is in your best interest to maintain proof or an expired/replaced policy as long as a valid claim could be filed against it.

Also, certain motor carriers may post a surety bond rather than obtaining insurance. Strict compliance with rules under 387.301 to 387.323 must be followed in order to do this. Freight forwarders may also post surety bonds instead of obtaining insurance. They must strictly comply with rules under 387.401 to 387.419.

# Part 390

# 390.15(b) – Accident Register.

An "accident" is defined under 390.5 as an occurrence involving a commercial motor vehicle operating on a public roadway which results in a fatality, an injury requiring treatment away from the scene of the occurrence, or towing of any motor vehicle due to disabling damage. It does not include an occurrence involved in loading or unloading cargo or boarding or alighting passengers. Such occurrences are commonly referred to as "recordable accidents" because they must be recorded on an accident register. The register must contain required information for each accident in the past **three** years. Texas law does not require you to maintain copies of official accident reports, but doing so would meet the requirements of the accident register.

# 390.29 - Location of Records or Documents

Generally a motor carrier must keep all records required by other parts of the safety regulations at the principal place of business. If the motor carrier has multiple office and operating locations, records of specific drivers and/or trucks may be kept at a regional office or a work reporting location. However, if federal, state or local officials with authority to audit these records makes a request, the motor carrier must make them available at the principal place of business or other location specified by the agent or representative within 48 hours, excluding weekends and federal holidays.

# 390.31 - Copies of Records or Documents

Generally a motor carrier must keep all records in their original form. However, a motor carrier may microfilm records provided the motor carrier has sufficient means to access and reproduce the records, and any records where color or shading is relevant are marked to retain this relevance in the black & white context of microfilming. A motor carrier may also scan or otherwise store such records or documents electronically as long as the motor carrier can reproduce these documents in written form, including verifying required signatures. Originals may be destroyed after imaging, as long as the imaging meets these requirements.

# Part 391

# 391.51 – Driver Qualification Files.

Driver qualification records may be maintained with the rest of the driver's personnel file (i.e. records required by the motor carrier but not required by motor carrier safety regulations). Most information in driver qualification files must be maintained as long as the driver is driving for the motor carrier, and then

for three more years. However, the following records may be removed from the driver's qualification file three years after the date the document was made/signed ("executed"):

- > Annual state driving record reports (Note: not the original state driving record)
- Notes regarding the reviews of the annual state driving record checks
- Driver certifications of violations of the previous 12 months
- Medical certification of the driver's physical qualification
- Waivers of medical disqualifications

# 391.53 – Driver Investigation History Files

Driver investigation history files must be maintained in a secure location with controlled access. Information obtained may only be used to make the hiring decision. Only personnel responsible for the hiring decision and for maintaining these records may have access to these records. Exception: an insurer may see the records from these files that do not relate to drug/alcohol testing. These files must be maintained as long as the driver is driving for the motor carrier, and then for three more years (i.e. the same as for the regular driver qualification files).

# Subpart G – Limited Exceptions

Some drivers, based on when they started driving, what duties they perform and how many employers they have, do not need complete driver qualification files. But whatever records must still be maintained have the same retention requirements as for drivers with complete driver qualification files. For example, even if you are not required to maintain a job application, if the driver requires a medical certification, you must maintain the medical certification for at least three years after it is issued. Also, a copy of a negative pre-employment drug test must be maintained for one year.

# Part 395

# 395.1 – Various Exceptions

Time records which are created under a valid exception to the 395.8 Records of Duty Status requirement must still be kept for the same six month time period.

# 395.8 – Records of Duty Status

Motor carriers must maintain records of duty status (395.8(a)), supporting documents (395.8(k)(1)), and seven-day statements for first time or intermittent drivers (395.8(j)(2)), for 6 months after the date of receipt.

Drivers must maintain records of duty status with them on their vehicles for the last 7 days. They do not need to maintain time records, supporting documents, or seven-day statements with them on their vehicles.

# Part 396

- 396.3(c) For all vehicles under a motor carrier's control for 30 consecutive days, regular maintenance records must be kept for one year, but if the vehicle leaves the control of the motor carrier, the records may be disposed of 6 months after the vehicle is no longer under the carrier's control. Note: Intermodal equipment providers must maintain or cause to be maintained, records of maintenance for each unit of intermodal equipment tendered for a motor carrier
- 396.11(a)(4) daily driver vehicle inspection reports must be maintained for 3 months from the date the report was prepared.
- 396.23(b) Most CMVs in Texas are required to have a mandatory state CMV periodic (annual) inspections under 396.23 (see 37 TAC 4.37 for other jurisdictions authorized to give a mandatory state CMV inspection). The sticker issued to the vehicle is the only evidence required of such an inspection. It may be removed when the vehicle passes a re-inspection.

- 396.21 If you have a vehicle that does not require a mandatory state inspection, you may have a private vehicle inspector inspect the vehicle. Alternatively, you may have a state or federal CVSA Level I or V inspection. The private inspection report or the copy of the Level I or V report must be maintained for a period of 14 months after the inspection, although if the vehicle was inspected by a qualified inspector at another company, or was under the control of another company when it was inspected, you may allow the other company to maintain the record. You are, however, required to obtain and produce a copy of the inspection report from that other company if requested by federal/state/local authorities within 14 months after the inspection was performed.
- 396.19 If you are a person who performs periodic (annual) inspections but not as part of the mandatory program under 396.23(b) or CVSA roadside inspections, you must maintain records of your qualifications for the entire time you perform such inspections, and for one year thereafter.

# List of HM Regulations Related to Document Retention:

§107.504 Period of registration, updates, and record retention, Subsection (e)

§107.620 Recordkeeping requirements.

- §172.201 Preparation and retention of shipping papers, Subsection (e)
- §172.606 Carrier information contact, Subsection (b)(2)

§172.704 Training requirements, Subsection (d)

§177.817 Shipping papers, Subsections (e) & (f)

Part 180 Continuing qualification and maintenance of packagings

Subpart C Qualification, maintenance and use of cylinders, §180.215 Reporting and record retention requirements

Subpart D Qualification and maintenance of intermediate bulk containers, §180.352 Requirements for retest and inspection of IBCs, Subsection (g)

Subpart E Qualification and maintenance of cargo tanks, §180.417 Reporting and record retention requirements

Subpart G Qualification and maintenance of portable tanks, §180.605 Requirements for periodic testing, inspection and repair of portable tanks, Subsection (I)

# Part 107 Hazardous Materials Program Procedures

### §107.504 Period of Registration, Updates, and Record Retention

(i) Each registrant shall maintain a current copy of the registration information submitted to the Department and a current copy of the registration number identification received from the Department at the location identified in §107.503(a)(2) during such time the person is registered with the Department and for two years thereafter.

# §107.620 Recordkeeping Requirements.

- (a) Each person subject to the requirements of this subpart, or its agent designated under §107.608(e), must maintain at its principal place of business for a period of three years from the date of issuance of each Certificate of Registration:
  - (1) A copy of the registration statement filed with PHMSA; and
  - (2) The Certificate of Registration issued to the registrant by PHMSA.

(b) After January 1, 1993, each motor carrier subject to the requirements of this subpart must carry a copy of its current Certificate of Registration issued by PHMSA or another document bearing the registration number identified as the "U.S. DOT Hazmat Reg. No." on board each truck and truck tractor (not including trailers and semi-trailers) used to transport hazardous materials subject to the requirements of this subpart. The Certificate of Registration or document bearing the registration number must be made available, upon request, to enforcement personnel.

# Part 172 Hazardous Materials Table, Special Provisions, Hazardous Materials Communications, Emergency Response Information, and Training Requirements

§172.201 Preparation and retention of shipping papers.

(e) Retention and Recordkeeping - Each person who provides a shipping paper must retain a copy of the shipping paper required by §172.200(a), or an electronic image thereof, that is accessible at or through its principal place of business and must make the shipping paper available, upon request, to an authorized official of a Federal, State, or local government agency at reasonable times and locations. For a hazardous waste, the shipping paper copy must be retained for three years after the material is accepted by the initial carrier. For all other hazardous materials, the shipping paper must be retained for two years after the material is accepted by the initial carrier, except that, for rail, vessel, or air shipments, the date on the shipment waybill, airbill, or bill of lading may be used in place of the date of acceptance by the initial carrier, except that, for rail, vessel, or air shipments, the date on the shipping paper without change for multiple shipments of one or more hazardous materials having the same shipping name and identification number may retain a single copy of the shipping paper, instead of a copy for each shipment made, if the carrier also retains a record of each shipment made, to include shipping name, identification number, quantity transported, and date of shipment.

# §172.606 Carrier Information Contact.

(b)(2) Have the shipping paper and emergency response information readily available on the transport vehicle.

# §172.704 Training Requirements.

- (d) Recordkeeping A record of current training, inclusive of the preceding three years, in accordance with this section shall be created and retained by each hazardous materials employer for as long as that employee is employed by that employer as a hazardous materials employee and for 90 days thereafter. The record shall include:
  - (1) The hazardous materials employee's name;
  - (2) The most recent training completion date of the hazardous materials employee's training;
  - (3) A description, copy, or the location of the training materials used to meet the requirements in paragraph (a) of this section;
  - (4) The name and address of the person providing the training; and

(5) Certification that the hazardous materials employee has been trained and tested, as required by this subpart.

# §172.802 Components of a Security Plan.

(b) The security plan must be in writing and must be retained for as long as it remains in effect. Copies of the security plan, or portions thereof, must be available to the employees who are responsible for implementing it, consistent with personnel security clearance or background investigation restrictions and a demonstrated need to know. The security plan must be revised and updated as necessary to reflect changing circumstances. When the security plan is updated or revised, all copies of the plan must be maintained as of the date of the most recent revision.

# Part 177 Carriage by Public Highway

# §177.817 Shipping Papers.

- (e) Shipping paper accessibility accident or inspection. A driver of a motor vehicle containing hazardous material, and each carrier using such a vehicle, shall ensure that the shipping paper required by this section is readily available to, and recognizable by, authorities in the event of accident or inspection. Specifically, the driver and the carrier shall:
  - (1) Clearly distinguish the shipping paper, if it is carried with other shipping papers or other papers of any kind, by either distinctively tabbing it or by having it appear first; and
  - (2) Store the shipping paper as follows:
    - (i) When the driver is at the vehicle's controls, the shipping paper shall be:
      - (A) Within his immediate reach while he is restrained by the lap belt; and
      - (B) either readily visible to a person entering the driver's compartment or in a holder which is mounted to the inside of the door on the driver's side of the vehicle.
    - (ii) When the driver is not at the vehicle's controls, the shipping paper shall be:
      - (A) In a holder which is mounted to the inside of the door on the driver's side of the vehicle; or
      - (B) on the driver's seat in the vehicle.
- (f) Retention of shipping papers Each person receiving a shipping paper required by this section must retain a copy or an electronic image thereof, that is accessible at or through its principal place of business and must make the shipping paper available, upon request, to an authorized official of a Federal, State, or local government agency at reasonable times and locations. For a hazardous waste, the shipping paper copy must be retained for three years after the material is accepted by the initial carrier. For all other hazardous materials, the shipping paper copy must be retained for one year after the material is accepted by the carrier. Each shipping paper copy must include the date of acceptance by the carrier. A motor carrier (as defined in §390.5 of subchapter B of chapter III of subtitle B) using a shipping paper without change for multiple shipments of one or more hazardous materials having the same shipping name and identification number may retain a single copy of the shipping paper, instead of a copy for each shipment made, if the carrier also retains a record of each shipment made that includes shipping name, identification number, quantity transported, and date of shipment.

# Part 180 Continuing Qualification and Maintenance of Packagings

# Subpart C Qualification, Maintenance and Use of Cylinders

# §180.215 Reporting and Record Retention Requirements.

- (a) Facility records A person who requalifies, repairs or rebuilds cylinders must maintain the following records where the requalification is performed:
  - (1) Current RIN issuance letter;
  - (2) If the RIN has expired and renewal is pending, a copy of the renewal request;
  - (3) Copies of notifications to Associate Administrator required under §107.805 of this chapter;
  - (4) Current copies of those portions of this subchapter applicable to its cylinder requalification and marking activities at that location;
  - (5) Current copies of all exemptions governing special permit cylinders requalified or marked by the requalifier at that location; and
  - (6)The information contained in each applicable CGA or ASTM standard incorporated by reference in §171.7 of this subchapter applicable to the requalifier's activities. This information must be the same as contained in the edition incorporated by reference in §171.7 of this subchapter.
- (b) Requalification records Daily records of visual inspection, pressure test, and ultrasonic examination if permitted under a special permit, as applicable, must be maintained by the person who performs the requalification until either the expiration of the requalification period or until the cylinder is again requalified, whichever occurs first. A single date may be used for each test sheet, provided each test on the sheet was conducted on that date. Ditto marks or a solid vertical line may be used to indicate repetition of the preceding entry for the following entries only: date; actual dimensions; manufacturer's name or symbol, if present; owner's name or symbol, if present; and

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test operator. Blank spaces may not be used to indicate repetition of a prior entry. The records must include the following information: (b)(1) Calibration test records. For each test to demonstrate calibration, the date; serial number of the calibrated cylinder; calibration test pressure; total, elastic and permanent expansions; and legible identification of test operator. The test operator must be able to demonstrate that the results of the daily calibration verification correspond to the hydrostatic tests performed on that day. The daily verification of calibration(s) may be recorded on the same sheets as, and with, test records for that date.

(b)(2) Pressure test and visual inspection records. The date of requalification; serial number; DOT specification or special permit number; marked pressure; actual dimensions; manufacturer's name or symbol; owner's name or symbol, if present; result of visual inspection; actual test pressure; total, elastic and permanent expansions; percent permanent expansion; disposition, with reason for any repeated test, rejection or condemnation; and legible identification of test operator. For each cylinder marked pursuant to §173.302a(b)(5) of this sub-chapter, the test sheet must indicate the method by which any average or maximum wall stress was computed. Records must be kept for all completed, as well as unsuccessful tests. The entry for a second test after a failure to hold test pressure must indicate the date of the earlier test.

(b)(3) Wall stress. Calculations of average and maximum wall stress pursuant to §173.302a(b)(3) of this sub-chapter, if performed.

(b)(4) Calibration certificates. The most recent certificate of calibration must be maintained for each calibrated cylinder.

- (c) Repair, rebuilding or reheat treatment records.
  - (1) Records covering welding or brazing repairs, rebuilding or reheat treating shall be retained for a minimum of fifteen years by the approved facility.
  - (2) A record of rebuilding, in accordance with §180.211(d), must be completed for each cylinder rebuilt. The record must be clear, legible, and contain the following information:
    - (i) Name and address of test facility, date of test report, and name of original manufacturer;
    - (ii) Marks stamped on cylinder to include specification number, service pressure, serial number, symbol of manufacturer, inspector's mark, and other marks, if any;
    - (iii) Cylinder outside diameter and length in inches;
    - (iv) Rebuild process (welded, brazed, type seams, etc.);
    - (v) Description of assembly and any attachments replaced (e.g., neckrings, footrings);
    - (vi) Chemical analysis of material for the cylinder, including seat and Code No., type of analysis (ladle, check), chemical components (Carbon (C), Phosphorous (P), Sulfur (S), Silicon (Si), Manganese (Mn), Nickel (Ni), Chromium (Cr), Molybdenum (Mo), Copper (Cu), Aluminum (Al), Zinc (Zn)), material manufacturer, name of person performing the analysis, results of physical tests of material for cylinder (yield strength (psi), tensile strength (psi), elongation percentage (inches), reduction in area percentage, weld bend, tensile bend, name of inspector);
    - (vii) Results of proof pressure test on cylinder, including test method, test pressure, total expansion, permanent expansion, elastic expansion, percent permanent expansion (permanent expansion may not exceed ten percent (10%) of total expansion), and volumetric capacity (volumetric capacity of a rebuilt cylinder must be within ±3% of the calculated capacity);
    - (viii) Each report must include the following certification statement: "I certify that this rebuilt cylinder is accurately represented by the data above and conforms to all of the requirements in Subchapter C of Chapter I of Title 49 of the Code of Federal Regulations." The certification must be signed by the rebuild technician and principal, officer, or partner of the rebuild facility.

# Subpart D Qualification and Maintenance of Intermediate Bulk Containers

# §180.352 Requirements for Retest and Inspection of IBCs.

(g) Record retention.

- (1) The owner or lessee of the IBC must keep records of periodic retests, initial and periodic inspections, and tests performed on the IBC if it has been repaired or remanufactured.
- (2) Records must include design types and packaging specifications, test and inspection dates,

name and address of test and inspection facilities, names or name of any persons conducting test or inspections, and test or inspection specifics and results.

(3) Records must be kept for each packaging at each location where periodic tests are conducted, until such tests are successfully performed again or for at least 2.5 years from the date of the last test. These records must be made available for inspection by a representative of the Department on request.

# Subpart E Qualification and Maintenance of Cargo Tanks

# §180.417 Reporting and Record Retention Requirements.

- (a) Vehicle certification.
  - (1) Each owner of a specification cargo tank must retain the manufacturer's certificate, the manufacturer's ASME U1A data report, where applicable, and related papers certifying that the specification cargo tank identified in the documents was manufactured and tested in accordance with the applicable specification. This would include any certification of emergency discharge control systems required by §173.315(n) of this subchapter or §180.405(m). The owner must retain the documents throughout his ownership of the specification cargo tank and for one year thereafter. In the event of a change in ownership, the prior owner must retain non-fading photo copies of these documents for one year.
  - (2) Each motor carrier who uses a specification cargo tank motor vehicle must obtain a copy of the manufacturer's certificate and related papers or the alternative report authorized by paragraph (a)(3)(i) or (ii) of this section and retain the documents as specified in this paragraph (a)(2). A motor carrier who is not the owner of a cargo tank motor vehicle must also retain a copy of the vehicle certification report for as long as the cargo tank motor vehicle is used by that carrier and for one year thereafter. The information required by this section must be maintained at the company's principal place of business or at the location where the vehicle is housed or maintained. The provisions of this section do not apply to a motor carrier who leases a cargo tank for less than 30 days.
  - (3) DOT Specification cargo tanks manufactured before September 1, 1995—
    - (i) Non-ASME Code stamped cargo tanks— If an owner does not have a manufacturer's certificate for a cargo tank and he wishes to certify it as a specification cargo tank, the owner must perform appropriate tests and inspections, under the direct supervision of a Registered Inspector, to determine if the cargo tank conforms with the applicable specification. Both the owner and the Registered Inspector must certify that the cargo tank fully conforms to the applicable specification. The owner must retain the certificate, as specified in this section.
    - (ii) ASME Code Stamped cargo tanks. If the owner does not have the manufacturer's certificate required by the specification and the manufacturer's data report required by the ASME, the owner may contact the National Board for a copy of the manufacturer's data report, if the cargo tank was registered with the National Board, or copy the information contained on the cargo tank's identification and ASME Code plates. Additionally, both the owner and the Registered Inspector must certify that the cargo tank fully conforms to the specification. The owner must retain such documents, as specified in this section.
- (b) Test or inspection reporting. Each person performing a test or inspection as specified in §180.407 must prepare a written report, in English, in accordance with this paragraph.
  - (1) Each test or inspection report must include the following information:
    - (i) Owner's and manufacturer's unique serial number for the cargo tank;
    - (ii) Name of cargo tank manufacturer;
    - (iii) Cargo tank DOT or MC specification number;
    - (iv) MAWP of the cargo tank;
    - (v) Minimum thickness of the cargo tank shell and heads when the cargo tank is thickness tested in accordance with §180.407(d)(4), §180.407(e)(3), §180.407(f)(3), or §180.407(i);
    - (vi) Indication of whether the cargo tank is lined, insulated, or both; and
    - (vii) Indication of special service of the cargo tank (e.g., transports material corrosive to the

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tank, dedicated service, etc.)

- (2) Each test or inspection report must include the following specific information as appropriate for each individual type of test or inspection:
  - (i) Type of test or inspection performed;
  - (ii) Date of test or inspection (month and year);
  - (iii) Listing of all items tested or inspected, including information about pressure relief devices that are removed, inspected and tested or replaced, when applicable (type of device, set to discharge pressure, pressure at which device opened, pressure at which device reseated, and a statement of disposition of the device (e.g., reinstalled, repaired, or replaced)); information regarding the inspection of upper coupler assemblies, when applicable (visually examined in place, or removed for examination); and, information regarding leakage and pressure testing, when applicable (pneumatic or hydrostatic testing method, identification of the fluid used for the test, test pressure, and holding time of test);
  - (iv) Location of defects found and method of repair;
  - (v) ASME or National Board Certificate of Authorization number of facility performing repairs, if applicable;
  - (vi) Name and address of person performing test;
  - (vii) Registration number of the facility or person performing the test;
  - (viii) Continued qualification statement, such as "cargo tank meets the requirements of the DOT specification identified on this report" or "cargo tank fails to meet the requirements of the DOT specification identified on this report";
  - (ix) DOT registration number of the registered inspector; and
  - (x) Dated signature of the registered inspector and the cargo tank owner.
- (3) The owner and the motor carrier, if not the owner, must each retain a copy of the test and inspection reports until the next test or inspection of the same type is successfully completed. This requirement does not apply to a motor carrier leasing a cargo tank for fewer than 30 days.
- (c) Additional requirements for Specification MC 330 and MC 331 cargo tanks.
  - (1) After completion of the pressure test specified in §180.407(g)(3), each motor carrier operating a Specification MC 330 or MC 331 cargo tank in anhydrous ammonia, liquefied petroleum gas, or any other service that may cause stress corrosion cracking, must make a written report containing the following information:
    - (i) Carrier's name, address of principal place of business, and telephone number;
    - (ii) Complete identification plate data required by Specification MC 330 or MC 331, including data required by ASME Code;
    - (iii) Carrier's equipment number;
    - (iv) A statement indicating whether or not the tank was stress relieved after fabrication;
    - (v) Name and address of the person performing the test and the date of the test;
    - (vi) A statement of the nature and severity of any defects found. In particular, information must be furnished to indicate the location of defects detected, such as in weld, heat-affected zone, the liquid phase, the vapor phase, or the head-to-shell seam. If no defect or damage was discovered, that fact must be reported;
    - (vii) A statement indicating the methods employed to make repairs, who made the repairs, and the date they were completed. Also, a statement of whether or not the tank was stress relieved after repairs and, if so, whether full or local stress relieving was performed;
    - (viii) A statement of the disposition of the cargo tank, such as "cargo tank scrapped" or "cargo tank returned to service"; and
    - (ix) A statement of whether or not the cargo tank is used in anhydrous ammonia, liquefied petroleum gas, or any other service that may cause stress corrosion cracking. Also, if the cargo tank has been used in anhydrous ammonia service since the last report, a statement indicating whether each shipment of ammonia was certified by its shipper as containing 0.2 percent water by weight.
  - (2) A copy of the report must be retained by the carrier at its principal place of business during the period the cargo tank is in the carrier's service and for one year thereafter. Upon a written

request to, and with the approval of, the Field Administrator, Regional Service Center, Federal Motor Carrier Safety Administration for the region in which a motor carrier has its principal place of business, the carrier may maintain the reports at a regional or terminal office.

- (3) The requirement in paragraph (c)(1) of this section does not apply to a motor carrier leasing a cargo tank for less than 30 days.
- (d) Supplying certificates and reports. Each person offering a DOT-specification cargo tank for sale or lease must provide the purchaser or lessee a copy of the cargo tank certificate of compliance, records of repair, modification, stretching, or rebarrelling; and the most recent inspection and test reports made under this section. Copies of such reports must be provided to the lessee if the cargo tank is leased for more than 30 days.

# Subpart G Qualification and Maintenance of Portable Tanks

# §180.605 Requirements for Periodic Testing, Inspection and Repair of Portable Tanks.

(I) Record retention. The owner of each portable tank or his authorized agent shall retain a written record of the date and results of all required inspections and tests, including an ASME manufacturer's date report, if applicable, and the name and address of the person performing the inspection or test, in accordance with the applicable specification. The manufacturer's data report, including a certificate(s) signed by the manufacturer, and the authorized design approval agency, as applicable, indicating compliance with the applicable specification of the portable tank, must be retained in the files of the owner, or his authorized agent, during the time that such portable tank is used for such service, except for Specifications 56 and 57 portable tanks.

# **TXDMV Record Retention Rules**

# 43 TAC 218.32

For a complete list on the Preservation & Destruction of Records visit www.sos.state.tx.us (Secretary of State) (Texas Administrative Code)

43 TAC 218.32 Motor Carrier Records