

CAB FOLDER

Cover Sheet (Company Name, Logo, Truck Number, MC, USDOT, EIN)

MC Authority

Insurance: Liability, Cargo, Physical

Truck Registration

Truck Annual Inspection

ELD Operators Manual

Blank Logbook Sheets (at least 8 days)

Blank DVIR Sheets

Accident Form

Trailer Registration

Trailer Annual Inspection

Lease Agreement (If Applicable)

IFTA License

Permits (NY, KYU, NM, OR, CT, PA)

Laminated Pre-Trip Inspection Instruction



Driver's Vehicle Inspection Report



CHECK ANY DEFECTIVE ITEM AND GIVE DETAILS UNDER "REMARKS."

DRIVER'S INSPECTION				
Date:	Truck/Tractor No.:	Trailer No.:	Trailer No.:	
☐ Air Compressor ☐ Air Lines ☐ Battery ☐ Brake Accessories ☐ Brakes ☐ Carburetor ☐ Clutch ☐ Defroster ☐ Drive Line ☐ Engine ☐ Fifth Wheel ☐ Front Axle ☐ Fuel Tanks ☐ Heater	☐ Horn ☐ Lights ☐ Head - Stop ☐ Tail - Dash ☐ Turn Indicators ☐ Mirrors ☐ Muffler ☐ Oil Pressure ☐ On-board Recorder ☐ Radiator ☐ Rear End ☐ Reflectors ☐ Safety Equipment ☐ Springs	☐ On-board Recorder ☐ Fire Extinguisher ☐ Flags-Flares-Fuses ☐ Spare Bulbs & Fuses ☐ Spare Seal Beam ☐ Starter ☐ Steering ☐ Tachograph ☐ Tires ☐ Transmission ☐ Wheels ☐ Windows ☐ Windshield Wipers ☐ Other:	☐ Brake Connections ☐ Brakes ☐ Coupling Chains ☐ Coupling (King) Pin ☐ Doors ☐ Hitch ☐ Landing Gear ☐ Lights - All ☐ Roof ☐ Springs ☐ Tarpaulin ☐ Tires ☐ Wheels ☐ Other:	☐ Brake Connections ☐ Brakes ☐ Coupling Chains ☐ Coupling (King) Pin ☐ Doors ☐ Hitch ☐ Landing Gear ☐ Lights - All ☐ Roof ☐ Springs ☐ Tarpaulin ☐ Tires ☐ Wheels ☐ Other:
REMARKS				
☐ The Condition of the above vehicle(s) is/are Satisfactory				
Driver's Printed Name		Driver's Signature		
MECHANICS CERTIFICATION (NOT REQUIRED IF CONDITION OF VEHICLE(S) WAS/WERE SATISFACTORY)				
☐ Above defects were corrected. ☐ Above defects need not be corrected for safe operation of the vehicle(s)				
Mechanic's Signature		Date		
NEXT DRIVER'S REVIEW (NOT REQUIRED IF CONDITION OF VEHICLE(S) WAS/WERE SATISFACTORY)				
Driver's Signature		Date		
Note: This form is provided as a suggested format for performing and documenting a driver's vehicle inspection. A motor carrier may use any format for reporting a driver's vehicle inspection which complies with 396.11.				

Annual Periodic Vehicle Inspection Report



Name and Address of Inspecting Company or Agency:			Certified Inspector's Name (Print or Type):	
Registered Owner's Name:			Date:	Time:
Street:		City, State, Zip Code:		The signing of this inspection report certifies that the technician meets and exceeds all requirements of 49 CFR §396.17 and compatible state regulations and that the technician has the necessary tools, and is skilled in completion of the annual inspection, as listed in 49 CFR §396.17 Technician's Signature:
Motor Carrier Operating Vehicle (If different from Owner):				
Street:		City, State, Zip Code:		
License Plate Number/State:	Vehicle Identification Number:	Vehicle Make:	Vehicle Model:	Model Year

VEHICLE COMPONENTS INSPECTED

Item	OK	NA	Needs Repair	Repair Date	Item	OK	NA	Needs Repair	Repair Date	Item	OK	NA	Needs Repair	Repair Date
1. BRAKE SYSTEM					5. FUEL SYSTEM					10. SUSPENSION				
Adjustment	☐	☐	☐		Visible Leaks	☐	☐	☐		Springs (cracked/broken/shifted)	☐	☐	☐	
Drums or Rotors	☐	☐	☐		Fill Caps in place/intact	☐	☐	☐		U-bolts. Hangers, etc.	☐	☐	☐	
Hoses and/or Tubing	☐	☐	☐		Tank(s) securely attached	☐	☐	☐		Torque, Radius, Tracking Arms	☐	☐	☐	
Lining	☐	☐	☐		6. LIGHTING DEVICES					11. FRAME				
Warning (Low Pressure)	☐	☐	☐		Headlamps	☐	☐	☐		Frame Members	☐	☐	☐	
Tractor Protection Valve	☐	☐	☐		Front Turn Signals	☐	☐	☐		Tire & Wheel Clearance	☐	☐	☐	
Air Compressor	☐	☐	☐		Front ID/Clearance Lamps	☐	☐	☐		Sliding Subframe (adj. axle)	☐	☐	☐	
Service Brakes	☐	☐	☐		Side Marker Lamps – Left	☐	☐	☐		12. TIRES				
Parking Brakes	☐	☐	☐		Side Marker Lamps -Right	☐	☐	☐		Steering Axle Tires-Condition	☐	☐	☐	
Electric Brakes	☐	☐	☐		Rear Turn Signals	☐	☐	☐		Steering Tires-over 4/32" tread	☐	☐	☐	
Hydraulic Brakes	☐	☐	☐		Stop Lamps	☐	☐	☐		Other Tires – Condition	☐	☐	☐	
Vacuum Brakes	☐	☐	☐		Tail Lamps	☐	☐	☐		Other Tires-over 2/32" tread	☐	☐	☐	
Warning (Sys Failure)	☐	☐	☐		Rear ID/Clearance Lamps	☐	☐	☐		13. WHEELS & RIMS				
2. STEERING SYSTEM					Reflectors / Ref Tape	☐	☐	☐		Lock/Slide Ring	☐	☐	☐	
Free Play (Lash)	☐	☐	☐		7. COUPLING DEVICES					Fasteners				
Steering Column	☐	☐	☐		5 TH Wheel	☐	☐	☐		Disk/Spoke Condition	☐	☐	☐	
Front Axle Beam	☐	☐	☐		Pintle Hooks	☐	☐	☐		Welds	☐	☐	☐	
Steering Gear Box	☐	☐	☐		Drawbar Eye	☐	☐	☐		List any other condition which may affect safe vehicle operation				
Pittman Arm	☐	☐	☐		Drawbar Tongue	☐	☐	☐						
Ball & Socket Joints	☐	☐	☐		Safety Devices	☐	☐	☐			☐	☐	☐	
Tie Rods & Drag Links	☐	☐	☐		8. EXHAUST SYSTEM									
Nuts, Bolts, Fasteners	☐	☐	☐		Leaks	☐	☐	☐			☐	☐	☐	
Power Steering Fluid	☐	☐	☐		Placement	☐	☐	☐			☐	☐	☐	
Ball & Socket Joints	☐	☐	☐		Ball & Socket Joints	☐	☐	☐			☐	☐	☐	
3. WINDSHIELDS					9. SAFE LOADING									
4. WIPERS	☐	☐	☐		Securement Devices	☐	☐	☐			☐	☐	☐	

I CERTIFY THE ANNUAL VEHICLE INSPECTION HAS BEEN DONE ACCURATELY AND COMPLETELY. I FURTHER CERTIFY THAT THIS INSPECTION COMPLIES WITH THE REQUIREMENTS OF 49 CFR §396.21. This information must be available on board the vehicle, either as a copy of this report, or on a decal that complies with 49 CFR §396.17(c)(2). This report must be kept a minimum of fourteen months from date of completion.

Certified Inspector's Signature:	Date:
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