

# DRIVER'S DAILY VEHICLE INSPECTION REPORT

§396.11(a) - Every motor carrier shall require its drivers to report, and every driver shall prepare a report in writing at the completion of each day's work on each vehicle operated.

§396.11(c) - Prior to operating a motor vehicle, motor carriers or their agent(s) shall effect repair of any items listed on the vehicle inspection report(s) that would be likely to affect the safety of operation of the vehicle.

§396.13 - Before driving motor vehicle I have satisfied myself that this vehicle is in safe operating condition and have reviewed the last vehicle inspection report required to be carried on power unit and acknowledge that there is a certification that the required repairs have been made.

SUNDAY	§396.11(a) - <input type="checkbox"/> I detect no defect <input type="checkbox"/> I detect the following defects Defects: _____	<input type="checkbox"/> all defect(s) or deficiency(s) has been corrected <input type="checkbox"/> correction is unnecessary
DATE	_____	_____
Truck #	_____ DRIVER'S SIGNATURE	_____ MECHANIC'S SIGNATURE
_____ DRS. SIGNATURE	_____	_____
MONDAY	§396.11(a) - <input type="checkbox"/> I detect no defect <input type="checkbox"/> I detect the following defects Defects: _____	<input type="checkbox"/> all defect(s) or deficiency(s) has been corrected <input type="checkbox"/> correction is unnecessary
DATE	_____	_____
Truck #	_____ DRIVER'S SIGNATURE	_____ MECHANIC'S SIGNATURE
_____ DRS. SIGNATURE	_____	_____
TUESDAY	§396.11(a) - <input type="checkbox"/> I detect no defect <input type="checkbox"/> I detect the following defects Defects: _____	<input type="checkbox"/> all defect(s) or deficiency(s) has been corrected <input type="checkbox"/> correction is unnecessary
DATE	_____	_____
Truck #	_____ DRIVER'S SIGNATURE	_____ MECHANIC'S SIGNATURE
_____ DRS. SIGNATURE	_____	_____
WEDNESDAY	§396.11(a) - <input type="checkbox"/> I detect no defect <input type="checkbox"/> I detect the following defects Defects: _____	<input type="checkbox"/> all defect(s) or deficiency(s) has been corrected <input type="checkbox"/> correction is unnecessary
DATE	_____	_____
Truck #	_____ DRIVER'S SIGNATURE	_____ MECHANIC'S SIGNATURE
_____ DRS. SIGNATURE	_____	_____
THURSDAY	§396.11(a) - <input type="checkbox"/> I detect no defect <input type="checkbox"/> I detect the following defects Defects: _____	<input type="checkbox"/> all defect(s) or deficiency(s) has been corrected <input type="checkbox"/> correction is unnecessary
DATE	_____	_____
Truck #	_____ DRIVER'S SIGNATURE	_____ MECHANIC'S SIGNATURE
_____ DRS. SIGNATURE	_____	_____
FRIDAY	§396.11(a) - <input type="checkbox"/> I detect no defect <input type="checkbox"/> I detect the following defects Defects: _____	<input type="checkbox"/> all defect(s) or deficiency(s) has been corrected <input type="checkbox"/> correction is unnecessary
DATE	_____	_____
Truck #	_____ DRIVER'S SIGNATURE	_____ MECHANIC'S SIGNATURE
_____ DRS. SIGNATURE	_____	_____
SATURDAY	§396.11(a) - <input type="checkbox"/> I detect no defect <input type="checkbox"/> I detect the following defects Defects: _____	<input type="checkbox"/> all defect(s) or deficiency(s) has been corrected <input type="checkbox"/> correction is unnecessary
DATE	_____	_____
Truck #	_____ DRIVER'S SIGNATURE	_____ MECHANIC'S SIGNATURE
_____ DRS. SIGNATURE	_____	_____