

**DRIVER'S DAILY LOG**

(ONE CALENDAR DAY - 24 HOURS)

**RECAP**

(MONTH) (DAY) (YEAR)

VEHICLE NUMBERS - (SHOW EACH UNIT)

I certify these entries are true and correct:

(TOTAL MILES DRIVING TODAY)

(DRIVER'S SIGNATURE IN FULL)

(NAME OF CARRIER OR CARRIERS)

(NAME OF CO-DRIVER)

(MAIN OFFICE ADDRESS)

(HOME TERMINAL ADDRESS)

	MID-NIGHT	1	2	3	4	5	6	7	8	9	10	11	NOON	1	2	3	4	5	6	7	8	9	10	11	TOTAL HOURS
1: OFF DUTY																									
2: SLEEPER BERTH																									
3: DRIVING																									
4: ON DUTY (NOT DRIVING)																									
5: OFF DUTY (WAITING TIME AT WELL SITE)																									
Oilfield Exemption 395.1(d)(2)																									
REMARKS																									

**SHIPPING DOCUMENTS:**

B/L or Manifest No. or Shipper &amp; Commodity

Enter name of place you reported and where released from work and when and where each change of duty occurred.

**USE TIME STANDARD AT HOME TERMINAL**

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**15062****70 HR/8 DAY DRIVERS****A.**  
TOTAL HRS. ON DUTY LAST 7 DAYS, INCL. TODAY**B.**  
TOTAL HRS. AVAILABLE TOMORROW  
70 HRS. MINUS A**C.**  
TOTAL HRS. ON DUTY LAST 8 DAYS, INCL. TODAY**60 HR/7 DAY DRIVERS****A.**  
TOTAL HRS. ON DUTY LAST 6 DAYS, INCL. TODAY**B.**  
TOTAL HRS. AVAILABLE TOMORROW  
60 HRS. MINUS A**C.**  
TOTAL HRS. ON DUTY LAST 7 DAYS, INCL. TODAY**DRIVER'S VEHICLE INSPECTION REPORT**

CARRIER'S NAME: \_\_\_\_\_

CARRIER'S ADDRESS: \_\_\_\_\_

TRACTOR/TRUCK NO.: \_\_\_\_\_ TRAILER(S) NO.(S): \_\_\_\_\_

TRACTOR/TRUCK	DRIVER'S REPORT	MECHANIC'S REPORT	TRACTOR/TRUCK	DRIVER'S REPORT	MECHANIC'S REPORT	TRACTOR/TRUCK	DRIVER'S REPORT	MECHANIC'S REPORT	TRAILER(S)	DRIVER'S REPORT	MECHANIC'S REPORT
Brake Lines to Trailer .....			Frame & Assembly .....			Transmission .....			Brakes .....		
Electric Lines to Trailer .....			Head Lights .....			Rear Vision Mirror .....			Brake Connections .....		
Drive Line .....			Tail Lights .....			Steering .....			Coupling Devices .....		
Coupling Devices .....			Stop & Turn Lights .....			Service Brakes .....			Coupling (King) Pin .....		
Tires, Wheels, Rims .....			Clearance & Marker Lights ..			Speedometer .....			Doors .....		
Suspension System .....			Reflectors .....			Other Items .....			Hitch .....		
Body .....			Air Pressure Warning Device			<b>EMERGENCY EQUIPMENT</b>			Landing Gear .....		
Glass .....			Oil Pressure .....			Reflective Triangles .....			Lights - All .....		
Fuel System .....			Ammeter .....			Fire Extinguisher .....			Roof .....		
Cooling System .....			Horn .....			Flags, Fusees, Reflectors .....			Suspension System .....		
Engine .....			Windshield Wipers .....			Spare Bulbs, Fuses .....			Tarpaulin .....		
Leaks .....			Parking Brakes .....			Tire Chains .....			Tires .....		
Exhaust .....			Clutch .....						Wheels - Rims .....		
									Other Items .....		

I MADE INSPECTION AS REQUIRED ON LISTED ITEMS

DRIVER \_\_\_\_\_ DATE \_\_\_\_\_

DRIVER USE ✓ IF SATISFACTORY  
USE X IF NOT SATISFACTORYMECHANIC USE ✓ WHEN CORRECTED AND  
YOUR INITIALSODOMETER END OF DAY \_\_\_\_\_  
ODOMETER START OF DAY \_\_\_\_\_  
TOTAL MILES DRIVEN TODAY \_\_\_\_\_  
NEXT LUBRICATION DUE AT \_\_\_\_\_  
MILEAGE \_\_\_\_\_☐ ABOVE DEFECTS CORRECTED  
☐ ABOVE DEFECTS NEED NOT BE CORRECTED  
FOR SAFE OPERATION OF VEHICLE

MECHANIC'S SIGNATURE: \_\_\_\_\_

DRIVER'S SIGNATURE: \_\_\_\_\_

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