**COMMERCIAL MOTOR VEHICLE DRIVER**

# Certification of Violations

# Annual Review of Driving Record

Every motor carrier shall obtain from each driver it employs a list ot all violations of motor vehicle·traffic laws and ordinances (other than violations involving only parking) of which the driver has been convicted, or on account of which he/she has forfeited bond or collateral during the preceding 12 months (Section 391.27). If the driver has not been convicted of, or forfeited bond or collateral for any violation that otherwise must be listed, he/she shall so certify (Section 391.27)

**Completed by Driver – Certification of Violations**

|  |  |  |
| --- | --- | --- |
| NAME OF DRIVER: (PRINT) | SOCIAL SECURITY NUMBER | DATE OF EMPLOYMENT |
| HOME TERMINAL (CITY AND STATE) | DRIVER'S LICENSE NUMBER STATE | EXPIRATION DATE |

## I certify that the following is a true and complete list of traffic violations required to be listed (other than those I have provided under Part 383) for which Ihave been convicted or forfeited bond or collateral during the past 12 months. (If you have had no violations, check the following box) > [ ]

 **Date Offense Location Type of Vehicle Operated**

If no violations are listed above, Icertify that I have not been convicted or forfeited bond or collateral on account of any violation (other than those Ihave provided under Part 383} required to be listed during the past 12 months.

Date of Certification Driver's Signature

**Completed by Motor Carrier – Annual Rvew of Driving Record**

Review the Certification of Vio.lations listed above and other information described in Section 391.25 of the Federal Motor Carrier Safety Regulations. Complete the information requested below.

I have hereby reviewed the driving record of the above named driver of Section 391.25 and I find that he/she (check one):

[ ]  Meets minimum requirements for safe driving [ ]  Is disqualified to drive a motor vehicle pursuant to Section 391.15

[ ]  Does not adequately meet satisfactory safe driving performance Action taken with driver:

Reviewed by Name Title

Signature Motor Carrier Date