

DRIVER'S DAILY LOG (24 HOURS)
USE TIME STANDARD AT HOME TERMINAL

1. CYCLE 2. IF DEFERRED OFF DUTY
 70 HR / 7 DAY 120 HR / 14 DAY DAY 1 DAY 2

NAN **044784.3** **044269.1** **515.2** **5** / **12** / **2023**
 NAME OF CARRIER ENDING ODOMETER STARTING ODOMETER KMS DRIVEN TODAY DAY MONTH YEAR
138 B Mission Road Fort William FN **Ted Edward O'Flaherty**
 MAIN OFFICE ADDRESS DRIVER'S NAME IN FULL (PLEASE PRINT)
Kenora District Jail **Ted O'Flaherty** **CXPM142**
 ADDRESS OF ORIGINATING TERMINAL DRIVER'S SIGNATURE TRUCK LICENSE PLATE #
1 Birch cres, Frenchman's Head Lac Seul FN.

DAY START TIME (IF OTHER THAN MIDNIGHT)	1. OFF DUTY	2. SLEEPER BERTH	3. DRIVING	4. ON DUTY (NOT DRIVING)	REMARKS	TRAILER LICENSE PLATE #		TOTAL TRUCK HOURS TODAY
						1	2	TOTAL HOURS
								7.5

Tamela Southwind picked up at 09:15am, dropped off at 1 Birch cres at 14:00.

MANIFEST/BILL OF LADING #	PREVIOUS 14 DAYS	DATE														END ODO	START ODO
		1	2	3	4	5	6	7	8	9	10	11	12	13	14		

DRIVER'S DAILY VEHICLE INSPECTION REPORT

NAN **2 Machin Drive, Kenora, ON.** **CXPM142** **ON**
 CARRIER LOCATION OF INSPECTION TRACTOR/TRUCK LIC. PLATE # JURISDICTION
138 B Mission Road, Fort William. **Dec 5, 2023.** **09:00**
 ADDRESS INSPECTION DATE INSPECTION TIME TRAILER #1 LIC. # JURISDICTION
Fort William First Nation. **Ford Edge** **044269.1**
 CITY VEHICLE MAKE / MODEL ODOMETER (MILES / KM) TRAILER #2 LIC. # JURISDICTION

I declare that the vehicle(s) shown above has (have) been inspected in accordance with the applicable requirements of Schedule 1 and / or jurisdiction legislation.
 No Defects Found **Ted O'Flaherty** **Ted O'Flaherty**
 Inspector / Driver's Name Print Inspector / Driver's Signature Driver's Signature (if different from Inspector)

CHECK ANY DEFECTIVE ITEM AND GIVE DETAILS UNDER REMARKS REFER TO ACCOMPANYING SCHEDULE 1 TO IDENTIFY DEFECTS

- | | | | |
|---|--|--|--|
| <p>TRACTOR/TRUCK</p> <ul style="list-style-type: none"> <input checked="" type="checkbox"/> Brake Adjustments <input checked="" type="checkbox"/> Brake Connections <input checked="" type="checkbox"/> Cargo Securement <input checked="" type="checkbox"/> Coupling Devices <input checked="" type="checkbox"/> Dangerous Goods Placard/Holder <input checked="" type="checkbox"/> Frame & Cargo Body <input checked="" type="checkbox"/> Inspection Decal <input checked="" type="checkbox"/> Lamps & Reflectors <input checked="" type="checkbox"/> Plate Validation Sticker <input checked="" type="checkbox"/> Suspension System <input checked="" type="checkbox"/> Tires <input checked="" type="checkbox"/> Wheels/Hubs/Fasteners | <p>TRAILER #</p> <ul style="list-style-type: none"> <input type="checkbox"/> 1 <input type="checkbox"/> 2 | <p>TRACTOR/TRUCK</p> <ul style="list-style-type: none"> <input checked="" type="checkbox"/> Air Brake Adjustments <input checked="" type="checkbox"/> Brakes - Pedal/Booster/Gauges <input checked="" type="checkbox"/> Brakes - Warning Lights: Low Pressure, Vacuum/Failure <input checked="" type="checkbox"/> Compressor <input checked="" type="checkbox"/> Hoses & Connections <input checked="" type="checkbox"/> Hydraulic Brake Fluid <input checked="" type="checkbox"/> Parking Brakes <input checked="" type="checkbox"/> Battery <input checked="" type="checkbox"/> Defroster/Heater <input checked="" type="checkbox"/> Documents - Registration, etc. <input checked="" type="checkbox"/> Driver Controls <input checked="" type="checkbox"/> Driver Seat | <p>TRACTOR/TRUCK</p> <ul style="list-style-type: none"> <input checked="" type="checkbox"/> Emergency Equipment/Safety Devices <input checked="" type="checkbox"/> Exhaust System <input checked="" type="checkbox"/> Fifth Wheel <input checked="" type="checkbox"/> Fuel System <input checked="" type="checkbox"/> General <input checked="" type="checkbox"/> Glass & Mirrors <input checked="" type="checkbox"/> Horn <input checked="" type="checkbox"/> Pintle Hook <input checked="" type="checkbox"/> Power Steering System <input checked="" type="checkbox"/> Radiator <input checked="" type="checkbox"/> Steering Mechanism <input checked="" type="checkbox"/> Towing Attachment <input checked="" type="checkbox"/> Windshield Wiper/Washer |
|---|--|--|--|

DEFECTS EN ROUTE _____
 REMARKS _____

Above defects corrected Above defects need not be corrected for safe operation of vehicle

Signature of Authorized Repair Person _____ Date _____ Driver's Signature _____ Date _____

Vehicle/Load/Height/Width (MB Reg. 95/2008)
4/12 kg