

Assignment Report

Motor Carrier Safety

17. **Vehicle Inspection Data:**

	MB 16+	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.
Inspections	1							
Defective Vehicles	0							
OOS Vehicles	0							
Level	1							

18. **Vehicle Inspection Violations:**

	MC	MB 1-15	MB 16+	SB 1-8	SB 9-15	SB 16+	VAN 1-8	VAN 9-15	TRK	TT	TRA
Brakes											
Steering											
Lights											
Tires, Wheels, Rims											
Horn											
Windshield and Wipers											
Mirrors											
Emergency Equip, Exits											
Coupling Devices											
Frame											
Suspension											
Exhaust											
Other											
Comments:											

19. **Driver Inspection Violations:**

Medical Card	Medical Waiver	Hours of Service	Driver's License
Comment:			

20. **Relevant Carrier History:**

This is a new Carrier that has applied for authority with the UTC

21. **Findings:**

A Level 1 CVSA inspection was performed and no defects were found. A CVSA decal was attached.

22. **Recommended Action:**

- No further action.
- Notify the company in writing of the findings by providing a copy of the safety investigation, vehicle inspection report, safety audit or other similar document.
- Require the company to submit a compliance plan in response to the 15-day letter requirement.
- Recheck – Safety Investigation (Date: _____)

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- Revisit to recheck a specific issue (Date: _____)
- Send the company a compliance letter. Require a response: Yes No
- Issue Administrative penalties in the amount of: \$ _____
- Issue a complaint.
- Stop company operations.

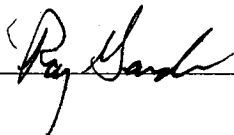
23. Is this carrier considered a high risk carrier as a result of this activity?

- Carrier accident ratio is higher than aggregate ratio.
- Carrier had an out-of-service ratio 25% higher at the last vehicle inspection.
- Carrier had a defect ratio 75% or higher at the last vehicle inspection.
- Carrier received more than one conditional or unsatisfactory safety investigation rating in more than one of the last four safety investigations (or less than four if four are not completed).
- Other (please explain):

23. Additional Comments:

Send to Licensing for further action

Investigator's Signature: _____



Date: 9/17/2014

OFFICE USE ONLY

Initial Review By: John Foster Date: 9/18/14

Initial Reviewer's Recommendation: Forward To Licensing Vehicle
Passed inspection. Other carrier vehicle inspected
By O.D.O.T.

Final Review By: _____ Date: _____

Final Reviewer's Recommendation: _____

Internal Processing

Date Closed: 9/18/14 By: Li Martin

Company Name: National Luxury Coach

Assignment #: 114085 Staff Assigned: Gardner