## Assignment Report Motor Carrier Safety



1. Investigator(s):	. Investigator(s): Ray Gardner		114084
3. Current Date:	9/23/2014	4. Date of Activity:	9/22/2014
5. Carrier Name:	Exploration Tours a	and Charters LLC	
6. Permit:	N/A 7. N	New Entrant Date of Authorit	y:
8. MOTCAR No.:	16635	9. Carrier is:	☐ Intrastate Only
10 1 1	_		☐ Interstate Only
10. Industry Code:	232	<del></del>	☐ Intra and Interstate
11. USDOT No.:	2538071	12. MC No.:	
13.   Destination	n Check		
☐ Copy of the l	Destination Check Safe	ety Plan is attached.	
<ul> <li>Number of Buses</li> </ul>	s/Motor Coaches Inspec	cted: 7-15 Passenger	16+ Passenger
<ul> <li>Number of vehic</li> </ul>	le inspections: Level hasis placed on the des		Level 3 Level 4
	<del> </del>	e our success at the next destina	ation check.
14. Safety Com	<del>-</del>		
	of the Individual Safe		
☐ Compliance I	staff complete for this	safety complaint:	
<del>-</del>			
Technical Ass	313141100		
☐ Technical Ass ☐ Number of Vo		Level 1 Level 1	7 I aval 2
☐ Number of V	ehicles Inspections:	Level 1 Level 2	2 Level 3
☐ Number of V	ehicles Inspections: Terminal Visit	Level 1 Level 2	2 Level 3
☐ Number of Volume ☐ Unannounced ☐ Other (Please	ehicles Inspections: l Terminal Visit Explain):		2 Level 3
□ Number of Vo □ Unannounced □ Other (Please  5. □ New Entran	ehicles Inspections:   Terminal Visit   Explain):   nt - Charter/Auto Tr	ansportation	2 Level 3
☐ Number of Volume ☐ Unannounced ☐ Other (Please  5. ☐ New Entrar  Is this carrier reference.	ehicles Inspections: I Terminal Visit Explain):  nt – Charter/Auto Tr	cansportation ting intra and interstate:	2 Level 3
□ Number of Vo □ Unannounced □ Other (Please  5. □ New Entrai  Is this carrier refer  Is this carrier base	ehicles Inspections: I Terminal Visit Explain):  nt - Charter/Auto Traced by FMCSA, operad in another state, required.	ransportation ting intra and interstate: sesting intrastate authority:	□ Yes ⊠ No □ Yes ⊠ No
□ Number of Vo □ Unannounced □ Other (Please  5. □ New Entrar  Is this carrier refer Is this carrier base Is this carrier base	ehicles Inspections: I Terminal Visit Explain):  nt - Charter/Auto Tr  red by FMCSA, opera d in another state, reque d in Washington, reque	cansportation ting intra and interstate:	□ Yes ⊠ No
□ Number of Vo □ Unannounced □ Other (Please  5. □ New Entrai  Is this carrier refer  Is this carrier base  Is this carrier base  Did staff complete	ehicles Inspections: I Terminal Visit Explain):  nt - Charter/Auto Tr  red by FMCSA, opera d in another state, reque d in Washington, reque	ting intra and interstate: sesting intrastate authority: esting intrastate authority:	□ Yes ⊠ No □ Yes ⊠ No

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Number of vehicle inspections: Level 1 1 Level 2	evel 5
➤ Conduct a SI/SA between three and nine months? ☐ Yes ☐ No ☐	SI
16. □ New Entrant – HHG	
- Indiana Control of the Processing Control	
To this coming hand in small	No
To this coming has a fix XV 1.	No
<ul> <li>Is this carrier based in washington, requesting intrastate authority:</li> <li>Did staff complete the following:</li> </ul>	No
Thomas to all and in land to the state of th	N
North and Continue	No evel 5
➤ Conduct a SI/SA between three and nine months? ☐ Yes ☐ No ☐	SI SA
➤ Conduct technical assistance within three months?	No Li SA
	INO
17.   CSA Investigation	
☐ Full Investigation	
☐ Focused Investigation	
Basic is for: ☐ Passenger Carrier ☐ HHG Carrier ☐ Solid Waste Carrier	
Basic Threshold Percentile:	
☐ Unsafe Driving %	
☐ Fatigued Driving (HOS) %	
□ Crash %	
□ Driver Fitness %	
□ Drug/Alcohol %	
☐ Vehicle Maintenance %	
To venicle ivianitenance //	
18.  Individual Safety Plan Only:	
What activity did staff complete for this safety complaint?	
☐ Attach a copy of the Individual Carrier Safety Plan	
☐ Safety Investigation	
☐ Technical Assistance	
Number of vehicle inspections Level 1 Level 2 Level 5	
Unannounced terminal visit	
Other (Please Explain):	
19.   Safety Investigation	
☐ Safety Audit	
■ SI Rating:  ☐ Satisfactory ☐ Unsatisfactory ☐ Conditional	
SA Rating: Pass Fail	
Number of vehicles operated:	

Assignment Report
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=	Total miles for prior year:		Motor Carrier Safety
	Recordable accidents for prior year:		
•	Accident Ratio:	%	

## 20. ☐ Part B Violations:

Part	Violations	Part	Violations	Part	Violations
382/40		383		387	
390		391		392	
395		396		397	

21. 

Wehicle Inspection Data:

	MC	MB 1-15	MB 16+	SB 1-8	SB 9-15	SB 16+	VAN 1-8	VAN 9-15	TRK	TT	TRA
Inspections	1				<u> </u>			- 20			
Defective Vehicles	9										
OOS Vehicles	0										
Level											

22. 

Wehicle 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					1		10	7-13	· · · · · · · · · · · · · · · · · · ·		,
Steering				-			<del>                                     </del>				
Lights	, , , , , , , , , , , , , , , , , , , ,										
Tires, Wheels,			-				<del> </del>				
Rims											
Horn											
Windshield											
and Wipers		Ì						ĺ			
Mirrors											
Emergency											
Equip, Exits									i		
Coupling											
Devices								1			
Frame		`									
Suspension											
Exhaust											<del></del>
Other											
Comments:										L	·

23. 

Driver Inspection Violations:

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

coach that was previously owned by Discovery Tour would indicate that Discovery Tours has any holding some business going Intra=State and in time take tou	S with this new entrant. The new owner hopes to get
25. Findings:	
In checking out the paperwork provided it shows a bit There was a copy of a current Annual inspection. A I and there were no violations found and a CVSA decay the previous plate on the vehicle was 44842RD, the provided in the previous plate on the vehicle was 44842RD.	evel 1 CVSA inspection was completed on the coach was applied. On the vehicle registration it shows
26. Recommended Action:	
<ul> <li>☑ No further action.</li> <li>☐ Notify the company in writing of the findings by vehicle inspection report, safety audit or other s</li> <li>☐ Require the company to submit a compliance pla</li> <li>☐ Recheck – Safety Investigation (Date:</li> <li>☐ Revisit to recheck a specific issue (Date:</li> <li>☐ Send the company a compliance letter. Require a</li> <li>☐ Issue Administrative penalties in the amount of:</li> <li>☐ Issue a complaint.</li> <li>☐ Stop company operations.</li> </ul>	imilar document.  n in response to the 15-day letter requirement. ))
27. Is this carrier considered a high risk carrier a	s a regult of this cotinity?
☐ Carrier accident ratio is higher than aggregate rat ☐ Carrier had an out-of-service ratio 25% higher at ☐ Carrier had a defect ratio 75% or higher at the las ☐ Carrier received more than one conditional or uns than one of the last four safety investigations (or ☐ Other (please explain):	o. the last vehicle inspection. t vehicle inspection. atisfactory safety investigation rating in more

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Send to Licensing for further action.

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Click here to enter
Date: a Garage

Investigator's Signature:

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OFFICE USE ONLY
Initial Review By: John Losh Date: 9/23/19
Initial Reviewer's Recommendation: The vehicle was previously owned
Dy Viscovery Tours. The driver is a former Discovery Tours
Descovery Tours NY + Seq TO Sky Charters Employee. If The
Current Owner is NOT affiliated with These DOS carrier - Then
forward to hicensing for Further actions
Final Review By: Date: 9/26/14
Final Reviewer's Recommendation: I see no diret connection with previous
Corrurs ( Disrarry & See to Sky) offer the same drum and the fact that
he is listed at the sos website as the company contact. Bill at sale
DUS shows substantial investment by MR. DoepH.
* OK to issue authority.
Internal Processing
Date Closed: 4/26/14 By: Lin Martin  Company Name: Exploration Towns of Charles U.C.
Company Name: Exploration Towns & Charters U.C.

Staff Assigned:

Assignment #:

114084