



ANNUAL REVIEW OF DRIVING RECORD

PART A - CERTIFICATION OF VIOLATIONS

Driver Name

MOTOR CARRIER INSTRUCTIONS: The company is required by the DOT to perform an annual record check, to ensure the company is aware of any and all traffic violations committed by its drivers, including those in a private auto as well as any in a CMV.

Please list on the following lines all violations of motor vehicle traffic laws and ordinances of which you have been convicted, or on account of which you have forfeited bond or collateral during the last 12 months.

(Per FMCSR 391.27)

I certify that the following is a true and complete list of traffic violations required to be listed for which I have been convicted or forfeited bond or collateral during the past 12 months.

Date	Offense	Location	Type of Vehicle Operated

If no violations are listed above, I certify that I have not been convicted, forfeited bond, or collateral on account of any violations required to be listed during the past 12 months.

Driver's License # _____ State _____ Exp. Date _____

Change of Address _____

If you have moved in the last 12 months, provide your new address here:

Driver Signature	Date
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PART B - MVR (Attach MVR to form)

PART C -CARRIER'S ANNUAL REVIEW

The driver meets the minimum requirements for safe driving, or

The driver is disqualified to drive a CMV pursuant to 391.15., or

This driver is disqualified to drive a CMV pursuant to company policy

Armada Pressure Control	Address	
Reviewed by	Title	Date