

# COMMERCIAL DRIVER COMPLIANCE SHEET

RUN NUMBER:  | RUN: ☐ North ☐ City ☐ West ☐ Southern

SERVICE: ☐ Paper ☐ Cleanup ☐ Co-Mingle ☐ Vegetation ☐ Beaches ☐ Bin Rollout ☐ Garbage ☐ Bin Deliveries ☐ Other

DAY OF SERVICE:

TRUCK REGO:

DRIVER'S FIRST NAME (WRITE WITHIN BOXES)  DRIVER'S LAST NAME (WRITE WITHIN BOXES)

Driver Employee Code

## VEHICLE PRE-OP INSPECTION must be completed by all drivers without exception before leaving depot.

NB: If RMS inspectors stop your vehicle and this section and break times are not filled out, you may be personally FINED.

Engine Oil: ☐ Yes or  liters Water: ☐ OK or  liters

Hydraulic Oil: ☐ OK or  liters Tested Emergency Stop Button: ☐ Yes ☐ No ☐ N/A

Tyres Checked (rim condition/damage, tyre cuts, wheelnuts tight, tread, dual tyres touching, inflation, mudflaps & guard): ☐ OK ☐ As Over

### SAFETY:

First Aid Kit present & adequately stocked: ☐ Yes ☐ No

Safety Triangles (3) Present: ☐ Yes ☐ No

Sanitation Kit sufficiently stocked: ☐ Yes ☐ No

Fire Extinguisher tagged and IN DATE: ☐ OK ☐ As Over

Lights checked (head, parking, reversing, indicators, tail, plate, brake, hazard, flashing heli beacons, bowl): ☐ OK ☐ As Over

Riding steps present & maintained: ☐ Yes ☐ No

Seatbelt condition & fitment: ☐ OK ☐ As Over

Spill Kit fully stocked: ☐ Yes ☐ No

Pinpoint System working: ☐ Yes ☐ No

Sunscreen Available in the Vehicle: ☐ Yes ☐ No

Reverse beeper operational? ☐ Yes ☐ No Door horn operational? ☐ Yes ☐ No (if no to either, write up in VCR book)

Fuel Card & Supervisor's Card in truck: ☐ Yes ☐ No Rego sticker expires

Next "A" service hours due date  Next "B" service hours due date

Adequate Stock of Resident Misuse Stickers (if NO for card, booklet or stickers, obtain from Supervisor): ☐ Yes ☐ No

2-Way, reverse camera operational: ☐ OK ☐ As Over Brakes roll checked: ☐ OK ☐ As Over

Check PTO, gearbox and starter motor area for rubbish and request cleaning on back of form if necessary ☐ OK ☐ As Over

## END OF SHIFT / VEHICLE SHUT DOWN

**DRIVER'S SIGNATURE:**

DATE: 

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- By Signing above, I acknowledge that I have:
- i. Had no accidents or third party incidents with respect to the performance of my duties today. (Accidents if any have been reported in the above section and necessary forms filled)
  - ii. Taken breaks as recorded on the front of this sheet, and
  - iii. that I have, in the last 24 hours, complied with the rest requirements in accordance with Heavy Vehicle Driver Fatigue laws. In the event that I am unsure of my obligations / responsibilities regarding these fatigue laws, I am aware that I can reference these requirements from the Company Pay Office.  
NB: A 30 minute break must be taken after the first 5 hours of continual work and another 30 minute break after another 5 hours worked.
  - iv. My driver's licence is current and I further understand that in the event my licence is suspended or cancelled, I will immediately inform my Supervisor as as I will be unable to continue in my role as a driver with the company. On renewal of my licence, I will arrange for my Supervisor to take a copy to update company records.
  - v. My crew and myself are wearing URM uniforms (hi viz shirts, shorts/track pants, suitable footwear with adequate tread, gloves, glasses, URM hats/URM caps, URM sweaters (as appropriate)). We have also requested appropriate PPE (glasses, sunscreen, gloves, ear plugs) as necessary for the function. If for any reason crews or yourself are not in uniform or have not sourced PPE, write reason in the OTHER section above, and inform your Supervisor. All pre operational and end of shift inspections have been undertaken.

NB: For any false declaration above, appropriate disciplinary measures will be taken.

Supervisor Confirmation:  
I acknowledge that the relevant paperwork for the accidents reported by the driver in the above section has been sent to Head Office and senior management have been advised of reported incidents.

**SUPERVISOR'S SIGNATURE:** \_\_\_\_\_