DRIVERSOURCE, INC.

Driver's Statement of On-Duty Time
Previous Seven Days

_____ (Driver Name) _____ (License Number) _____ (Issuing State)

Every driver, when first employed or used intermittently, must provide his/her employer with a statement indicating the time spent On-Duty* for the previous seven days and indicate the date and time at which he/she was last relieved from work. Re. **Section 395.8(j)(2)** of the Federal Motor Carrier Safety Regulations (FMCSR's).

Day	1	2	3	4	5	6	7
Date							
Hours On-Duty*							

I was last relieved of work on (date)_____at (time)_____ am / pm

_____
(Driver Signature)

*"On-Duty" time includes (Per **TITLE 49**, Code of Federal Regulations, **Section 395.2**):*

- *All time spent at the driving controls of a commercial motor vehicle;*
- *All time at a plant, terminal, facility or other property of a motor carrier or shipper or on any public property, waiting to be dispatched unless the driver has been relieved from duty by the motor carrier;*
- *All time inspecting, servicing or conditioning any commercial motor vehicle at any time;*
- *All time spent in or upon any commercial motor vehicle EXCEPT time spent in the sleeper berth;*
- *All time loading or unloading a commercial motor vehicle, supervising or assisting in the loading and unloading, attending a commercial motor vehicle being loaded or unloaded, remaining in readiness to operate a commercial motor vehicle or in giving or receiving receipts for shipments, either loaded or unloaded;*
- *All time repairing, obtaining assistance or remaining in attendance upon a disabled commercial motor vehicle;*
- *All time spent providing a breath or urine sample for alcohol or drug testing including travel time to and from the collection site;*
- *Performing ANY other work in the capacity, employ or service of a motor carrier;*
- *PERFORMING ANY COMPENSATED WORK FOR A NON-MOTOR CARRIER ENTITY.*