

COLORADO STATE PATROL	
WASTE ISOLATION PILOT PLANT PROJECT	
COMPLIANCE REVIEW	
VEHICLE	CHECKLIST

Date of Review:	Report #	PG #1
Carrier's Name:		
Address:		
City:	State:	ZIP:
Fed. HM Reg. #	U.S. D.O.T. #	
I.C.C. #	CO H.M.P. #	
Vehicle I.D. #	Vehicle Type:	

SECTION #1	INSPECTION AND MAINTENANCE RECORDS - 49 CFR, PART 396	Y	N
<input type="checkbox"/>	1. Complete vehicle information - 396.3(b)(1) _____		
	a. Company name _____		
	b. Manufacturer _____		
	c. Serial Number _____		
	d. Year of manufacture _____		
	e. Tire size _____		
	f. Name of entity furnishing vehicle, if not owned _____		
<input type="checkbox"/>	2. Nature and due date of inspection and maintenance - 396.3(b)(2) _____		
<input type="checkbox"/>	3. Inspection and repair record - 396.3(b)(3) _____		
<input type="checkbox"/>	4. Lubrication record - 396.3(b)(4) _____		
<input type="checkbox"/>	5. Annual inspection report - Appendix G, 396.17 and 396.31 _____		
	a. Name of inspector and signature _____		
	b. Owner of vehicle _____		
	c. Name of motor carrier _____		
	d. Date and location of inspection _____		
	e. License plate and vehicle identification numbers _____		
<input type="checkbox"/>	6. Adequate records retention - 396.3(c) and 396.21(b) _____		
<input type="checkbox"/>	7. Repairs made from roadside inspection forms _____		
<div>COMMENTS</div> <div>No</div> <div>GO TO SECTION #1, PAGE #2</div>		<div>PRESS</div>	

SECTION #2	DRIVER AND VEHICLE INSPECTION REPORTS - 49 CFR, PART 396.13	Y	N
<input type="checkbox"/>	1. Completed and signed by driver at end of day _____		
<input type="checkbox"/>	2. Identification of defects _____		
<input type="checkbox"/>	3. Evidence of corrective action taken _____		
<input type="checkbox"/>	4. Mechanic's signature certifying corrective action _____		
<input type="checkbox"/>	5. Driver's signature prior to starting trip _____		
<input type="checkbox"/>	6. Last report in power unit _____		
<input type="checkbox"/>	7. 3 months vehicle inspection reports - Part 396.11(c)(2) _____		
<div>COMMENTS</div> <div>No</div> <div>GO TO SECTION #2, PAGE #2</div>		<div>PRESS</div>	

WIPP PROJECT - COMPLIANCE REVIEW		Date of Review:	Report #	PG #2
VEHICLE	CHECKLIST	Vehicle I.D. #	Vehicle Type:	

SECTION #1	COMMENTS
<div style="border: 1px solid black; height: 400px; width: 100%;"></div> <div style="text-align: right; margin-top: 10px;"> <div style="border: 1px solid black; padding: 2px 5px;">PRESS</div> </div>	

SECTION #2	COMMENTS:
<div style="border: 1px solid black; height: 250px; width: 100%;"></div>	

Name of Reviewer:	Personnel #	Signature:
Time Started:	Time Completed:	