

People Haulers, Inc. Pre-Trip/Post Trip Inspection Sheet

Trip Date: _____ **Time:** _____ **Trip#:** _____ **Unit #:** _____

**Inspections must be completed prior to every trip. Inspection forms should be made available for passenger review.
Inspections filed for 3 months.**

All Lights, Signals and horn functioning _____	All Vision (Windows, mirrors) unobstructed _____
All doors and windows operational _____	Driving monitor operating _____
Seat Belts are working properly _____	Wipers and washer operating _____
Tires-Including Spare: Pressure / Treads Checked _____	Cell Phone Operating _____
Fire Extinguisher Charged _____	First Aid kit available _____
All paperwork (Insurance, Registration) current _____	

Hazard Assesment - Circle And/Or Check	YES	NO	Will This Affect Trip? Comments
1. Weather: Clear Rain Fog			
Any other weather hazard? (Wind, Sleet, Etc.)			
2. Road Conditions: Paved			
Gravel/Dirt/Board Road			
3. Are you familiar with roadways/route?			
4. Will any part of the trip be done in the dark?			
5. Directions:			
6. Comments and Any Other Driving Hazards:			

Driver Signature: _____ **Client:** _____

Passenger(s) Name: _____

This section to be completed by passenger(s) upon completion of trip			
Driver and Vehicle Performance	YES	NO	Comment Required on all "NO" Answers
1. Was the driver professional and courteous?			
2. Did driver review trip plan with passengers prior to trip?			
3. Did driver have a company issued picture ID card?			
4. Did driver conduct safety briefing prior to beginning trip?			
5. Was the vehicle operated safely?			
6. Did driver complete trip without ever appearing fatigued?			
7. Did driver make regular safety rest stops during trip?			
8. Did driver walk around / check vehicle during rest stops?			
9. Were all items (baggage, tools, etc) safely secured?			
10. Was trip completed without any vehicle problems?			
11. Was trip completed without any accidents?			All accidents must be reported immediately.
12. Do you feel that the trip was conducted safely?			

All Passengers and Drivers are Duly Authorized to STOP any Unsafe Trip

Feed Back Report Procedures

Driver: Complete top portion of form prior to trip; provide passengers with form and envelope to review during safety briefing

Passenger to evaluate trip and make comments using form; Passenger to seal completed form in envelope provided-Reports are confidential

Accidents Must Be Reported Immediately

24 Hour Hazardous / Emergency Situation Reporting - 800-256-5197

Personnel Transportation Trip Observations and Suggestions Should be Entered into your Company System

Please Reference Trip Number on any reports submitted