



INTERMITTENT OR MULTIPLE-EMPLOYER DRIVERS DRIVER STATEMENT OF ON-DUTY HOURS

INSTRUCTIONS: Motor carriers, when using a driver for the first time or intermittently, must obtain from the driver a signed statement giving the driver's total time on-duty during the immediately preceding 7 days and the time at which the driver was last relieved from duty prior to the beginning work for the carrier, as required by Section 395.8(j)(2) of the Federal Motor Carrier Safety Regulations. NOTE: Hours for any work during the preceding 7 days, including any **compensated** work for non-motor carrier, must be recorded on this form.

DRIVER NAME: _____

EMPLOYEE ID No: _____

DAY	1 (YESTERDAY)	2	3	4	5	6	7	
DATE								
HOURS WORKED								TOTAL HOURS

I hereby certify that the information given is correct to the best of my knowledge and belief, and that I was last relieved from work at

_____ A.M.
P.M.
TIME

On _____
Day Month Year

Driver's Signature

Date

