

DQ DRIVER FILE AUDIT

Operator/Driver Name: _____

- ☐ DQ Application (5 years of history)
- ☐ 3 Years of Reference Completed
- ☐ Initial Driver Abstract (obtained at time of hire, dated within 30 days of hire)
- ☐ Initial Commercial Driver Abstract (obtained at time of hire, dated within 30 days of hire)
- ☐ 3 year MVR (Abstract) Date: _____ (yyyy/mm/dd)
(obtained annually and within 12 months of the previous abstract date)
- ☐ Commercial Driver Abstract (obtained annually and within 12 months of the previous abstract date)
- ☐ Date: _____ (yyyy/mm/dd)
- ☐ Copy Driver License (both sides)
- ☐ Licence Expiry Date: _____ (yyyy/mm/dd)
- ☐ Medical due date Date: _____ (yyyy/mm/dd)
- ☐ CPIC Search Criminal Record
- ☐ Written Test(s)
- ☐ Road Test (Minimum Length 40 KM)
- ☐ Annual Review Date: _____ (yyyy/mm/dd)
- ☐ Receipt of company policies and procedures



- ☐ Copy of current, valid Dangerous Goods Training Certificate and copies of training materials, statement of experience, or other proof in writing.
- ☐ A record of the driver's convictions of safety laws relating to the operation of a CMV in the current year and in each of the 4 preceding years.
- ☐ A record of collisions involving any motor vehicle operated by the driver that are required to be reported to a peace officer.
- ☐ A record of any administrative penalty imposed on the driver.
- ☐ Signed and dated Abstract waiver/release
- ☐ A record of all training taken by a driver related to the operation of a vehicle and compliance with safety laws. Orientation checklist
- ☐ For Owner-Operator, copy of 1149A WSIB and a copy of the confirmation letter from WSIB, stating that the Owner-Operator is an Independent Operator
- ☐ For Owner-Operator, Application for 3rd party Alternative Insurance Coverage

Audit by : _____