

# DAILY TRIP LOG

Driver Daily Record

Trucker Daily Log Template

DATE	DRIVER NAME	DRIVER ID / CDL #
TRUCK / UNIT #	TRAILER #	CARRIER / COMPANY

## TRIP DETAILS

ORIGIN (CITY, STATE)	DESTINATION (CITY, STATE)				
START TIME	END TIME	TOTAL DRIVE HRS	ON-DUTY HRS	OFF-DUTY HRS	SLEEPER HRS
ODOMETER START	ODOMETER END	TOTAL MILES	LOADED / EMPTY		

## STOPS & ROUTE LOG

Time	Location (City, State)	Activity	Odometer	Notes

## LOAD / FREIGHT INFORMATION

BOL / PRO #	SHIPPER	CONSIGNEE	
COMMODITY	WEIGHT (LBS)	PIECES / PALLETS	SEAL #

\_\_\_\_\_  
Driver Signature

\_\_\_\_\_  
Date

# PRE-TRIP / POST-TRIP INSPECTION

DVIR — Driver Vehicle Inspection Report

Trucker Daily Log Template

DATE	DRIVER	TRUCK #	TRAILER #	MILEAGE
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Inspection Type:  Pre-Trip  Post-Trip  En-Route Mark each item: ✓ = OK X = Defect N/A = Not Applicable

## TRACTOR / TRUCK INSPECTION

- |   |  |  |
|---|--|--|
| <input type="checkbox"/> Engine oil level           | <input type="checkbox"/> Coolant level           | <input type="checkbox"/> Power steering fluid      |
| <input type="checkbox"/> Windshield washer fluid    | <input type="checkbox"/> Belts & hoses           | <input type="checkbox"/> Battery & cables          |
| <input type="checkbox"/> Air compressor             | <input type="checkbox"/> Fuel level / cap        | <input type="checkbox"/> Air filter                |
| <input type="checkbox"/> Steering wheel play        | <input type="checkbox"/> Horn (city & air)       | <input type="checkbox"/> Wipers & washers          |
| <input type="checkbox"/> Mirrors & windshield       | <input type="checkbox"/> Heater / defroster      | <input type="checkbox"/> Gauges & warning lights   |
| <input type="checkbox"/> Seat belts                 | <input type="checkbox"/> Emergency equipment     | <input type="checkbox"/> Fire extinguisher         |
| <input type="checkbox"/> Reflective triangles       | <input type="checkbox"/> Spare fuses             | <input type="checkbox"/> Headlights (high/low)     |
| <input type="checkbox"/> Turn signals & 4-way       | <input type="checkbox"/> Brake lights            | <input type="checkbox"/> Clearance / marker lights |
| <input type="checkbox"/> Tail lights                | <input type="checkbox"/> Reflectors              | <input type="checkbox"/> License plate & light     |
| <input type="checkbox"/> Tires (tread, pressure)    | <input type="checkbox"/> Wheels & rims           | <input type="checkbox"/> Lug nuts                  |
| <input type="checkbox"/> Hub oil seals              | <input type="checkbox"/> Mud flaps               | <input type="checkbox"/> Frame & cross members     |
| <input type="checkbox"/> Drive shaft                | <input type="checkbox"/> Exhaust system          | <input type="checkbox"/> Suspension / springs      |
| <input type="checkbox"/> Shock absorbers            | <input type="checkbox"/> Air lines & connections | <input type="checkbox"/> Catwalk / steps           |
| <input type="checkbox"/> Fifth wheel & locking jaws | <input type="checkbox"/> Kingpin / apron         | <input type="checkbox"/> Sliding 5th wheel locked  |

## TRAILER INSPECTION

- |   |  |   |
|---|--|---|
| <input type="checkbox"/> Coupling & safety latch  | <input type="checkbox"/> Landing gear            | <input type="checkbox"/> Frame & body           |
| <input type="checkbox"/> Doors & hinges           | <input type="checkbox"/> Door seal & latch       | <input type="checkbox"/> Floor condition        |
| <input type="checkbox"/> Tires (tread, pressure)  | <input type="checkbox"/> Wheels & lug nuts       | <input type="checkbox"/> Hub oil seals          |
| <input type="checkbox"/> Brakes & drums           | <input type="checkbox"/> Brake adjustment        | <input type="checkbox"/> Air lines & glad hands |
| <input type="checkbox"/> Lights — all functioning | <input type="checkbox"/> Reflectors & tape       | <input type="checkbox"/> Mud flaps              |
| <input type="checkbox"/> Load secured / strapped  | <input type="checkbox"/> Tarps in good condition | <input type="checkbox"/> DOT placards (if HM)   |

## BRAKE TEST (Required)

- Air leak rate test ( $\leq 3$  psi single, 4 psi combo, in 1 min)
- Low-air warning device (activates by 60 psi)
- Spring brake pop-out (between 20–45 psi)
- Service brake test (no pulling, grabbing)
- Tractor protection valve / parking brake holds

## DEFECTS NOTED / REMARKS

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- Condition of vehicle is satisfactory  Defects need correction before next trip

\_\_\_\_\_  
Driver Signature

\_\_\_\_\_  
Mechanic Signature (if repaired)

\_\_\_\_\_  
Date

# FUEL & EXPENSE LOG

Track fuel, tolls, scales, and receipts

Trucker Daily Log Template

DRIVER	TRUCK #	WEEK OF	TRIP / LOAD #
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## FUEL PURCHASES

Date	State	Station / City	Gallons	Price/Gal	Total \$	Odometer	MPG
<b>TOTALS</b>							

## OTHER EXPENSES (Tolls, Scales, Repairs, Lumper, Parking, Meals)

Date	Type	Description	Location	Amount
<b>TOTAL EXPENSES</b>				

**QUICK TIPS**

- Save every receipt — staple to the back of this sheet for IFTA & tax records.
- Record fuel BY STATE for IFTA filing. MPG = miles since last fill ÷ gallons this fill.
- Keep DVIRs at least 3 months; logbooks 6 months (49 CFR §396.11 / §395.8).

# EMERGENCY & QUICK REFERENCE

Keep this page in the cab

Trucker Daily Log Template

## DRIVER EMERGENCY INFORMATION

DRIVER FULL NAME	DATE OF BIRTH	BLOOD TYPE
HOME ADDRESS		
EMERGENCY CONTACT 1 — NAME & RELATION	PHONE	
EMERGENCY CONTACT 2 — NAME & RELATION	PHONE	
ALLERGIES / MEDICAL CONDITIONS	MEDICATIONS	
INSURANCE — HEALTH	MEMBER / POLICY #	

## COMPANY & DISPATCH

CARRIER / COMPANY	DOT #	MC #
DISPATCH PHONE (24 HR)	AFTER-HOURS / SAFETY LINE	
INSURANCE CARRIER (TRUCK)	POLICY # / CLAIMS PHONE	
ROADSIDE ASSISTANCE / TOWING	PHONE	

## IF YOU ARE IN AN ACCIDENT — DO THIS

1. Stop immediately. Turn on hazards. Set out reflective triangles (10 ft, 100 ft, 200 ft).
2. Check for injuries. Call 911 if anyone is hurt or vehicles cannot move.
3. Notify dispatch and your safety department BEFORE leaving the scene.
4. Do NOT admit fault. Do NOT discuss the accident except with police.
5. Get other driver's name, license, plate, insurance, and phone. Note witnesses.
6. Photograph all vehicles, damage, plates, road conditions, skid marks, and signs.
7. Get the police report number and the officer's name and badge.
8. If hauling hazmat, follow the Emergency Response Guide and notify DOT/CHEMTREC.
9. Submit a written report to your carrier as soon as possible — same day if able.
10. Post-accident drug/alcohol testing may be required under 49 CFR §382.303.

## IMPORTANT NUMBERS

Emergency / Police / Fire / Medical: 911  
CHEMTREC (Hazmat Spills, 24 hr): 1-800-424-9300  
FMCSA Safety Hotline: 1-888-368-7238

National Weather (road conditions): 511 (most states)  
Highway Watch / Trucker Help: 1-866-HWY-WATCH  
Poison Control: 1-800-222-1222