

COMPANY NAME: _____ DRIVER NAME: _____

FEDERAL MOTOR CARRIER SAFETY REGULATIONS

**Required for all drivers.*

I _____, hereby acknowledge that I have access to a copy of the Federal Motor Carrier Safety Regulations available to me at the company office. In addition a copy of regulations are available at <https://www.law.cornell.edu/cfr/text/49/subtitle-B/chapter-III/subchapter-B> to view electronically and free of charge.

I agree to familiarize myself with the Federal Motor Carrier Safety Regulations of the US Department of Transportation, Subchapter B, Chapter 3, Title 49.

Driver Signature

Date