



Train. Protect. Prevent.

## TRUCK SAFETY

All industrial companies are required to have a written safety transportation policy to meet the DOT and OSHA transportation safety requirements. To maintain safe transportation practices, all employees must be trained and educated on safe driving and complying with all required safety regulations on the roads. Truck drivers must meet all of the requirements for transporting materials, including the ability to read and write understand all requirements in English. Drivers must be mentally and physically qualified to drive a company truck and must provide valued medical certificate according to the standard. The DOT (US Department of Transportation) oversees the national transportation policy, and it includes the following agencies: FAA, FHWA, FMCSA, USCG, and TSA. The department of transportation has jurisdiction over transportation of hazardous materials on the interstate. OSHA's jurisdiction is limited to vehicles operated on the workplace and not on public roads. Companies must train and educate drivers. Training must be refreshed according to regulations, and it must be recorded.

Truck Safety:

Driver must:

- Have a valid commercial driver's license.
- Have at least 2 years of driving experience and 5 years of experience to transport hazardous materials.
- Be able to understand all signs.
- Have no violations within the past 5 years for driving under the influence of alcohol and drug, hit and run accidents, reckless driving, passing a stopped school bus, distracted driving, or failure to report an accidents.
- Must be in good health.

For safe driving:

- Watch your blind spots.
- Reduce your speed when driving through interstate construction.
- Always make sure to check and maintain your truck each morning before starting your work.
- Fill out the company check list.
- Load your truck wisely.
- Reduce your speed on curves. Follow speed limit.

## Work Site Review: Hazards/Safety Suggestions

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Company Name: \_\_\_\_\_ Work Site Location: \_\_\_\_\_

Date: \_\_\_\_\_ Start Time: \_\_\_\_\_ Finish Time: \_\_\_\_\_ Foreman/Supervisor: \_\_\_\_\_

## Employee Signatures: (continue on back of sheet if necessary)

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(My signature attests and verifies my understanding of and agreement to comply with, all company safety policies and regulations, and that I have not suffered, experienced, or sustained any recent job-related injury or illness)

**Manager/Supervisor's Signature:** \_\_\_\_\_

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