

DRIVER/VEHICLE EXAMINATION REPORT

Kansas Highway Patrol
 MOTOR CARRIER SAFETY ASSISTANCE
 700 SW Jackson, Ste 704
 Topeka, KS 66603
 Phone #: (785)296-7189 Fax #: (785)296-2858
 truckinspection@khp.ks.gov

Report Number: KS00XJ001113
Inspection Date: 4/27/2011 **Certification Date:**
Time Started: 13:04 **Time Ended:** 16:35
Inspection Level: II - Walk-Around
HM Inspection Type: No HM Inspection

EEI LLC
 330 W BRIDGE ST #345
 HOTCHKISS, CO 81419
Phone #:
USDOT #:
State #: S0000001313

Driver: ANTHONY, DOMINIC A
License #: REDACTED **State:** CO
Date of Birth:

Fax #:
MC/MX #:

Location: WABAUNSEE COUNTY - 197 **MilePost:** 345
Highway: I-70 **Origin:** HOTCHKISS, CO **Bill of Lading:** NONE
County: WABAUNSEE **Destination:** MOUNTAIN HOME, ARKANSAS **Cargo:** BUILDING MATERIALS
Shipper: EEI LLC

VEHICLE IDENTIFICATION:

Unit	Type	Make	Year	State	License#	Equipment ID	Unit VIN	GVWR	Issued Decal#	Existing Decal#	OOS Stkr.#
1	TR	FORD	2007	AR	838PNP	1	1FTSX21P57EA32340	9,001			
2	ST	PAMR	2010	AR	AA906039	1T	4P2WB2029AU100404	7,000			

BRAKE ADJUSTMENTS: No brake measurements recorded.

VIOLATIONS :

Section Code	St	Unit	OOS	Lvl 6	Citation #	Verify*	Crash	Violation Description
395.8(a)		D	Y	N		N	N	No log book for 04/27/2011 to 04/27/2011
391.41(a)		D	N	N		N	N	No medical certificate in driver's possession
390.21(b)		1	N	N		N	N	Carrier name and/or USDOT Number not displayed as required
392.4(a)		D	Y	N	X	N	N	Driver in possession of marijuana with intent to distribute marijuana

* N - Non-OOS or Driver OOS Violation

HazMat: No HM Transported. **Placard:** NA **Cargo Tank:**

Special Checks:

<input type="checkbox"/> Alcohol/Controlled Substance Check	<input type="checkbox"/> Traffic Enforcement	<input type="checkbox"/> Post Crash Inspection
<input type="checkbox"/> Conducted by Local Jurisdiction	<input type="checkbox"/> PASA Conducted Inspection	<input type="checkbox"/> PBBT Inspection
<input type="checkbox"/> Size and Weight Enforcement	<input checked="" type="checkbox"/> Drug Interdiction Search	Arrests: 1

Inspection Notes: Possession of marijuana was originally written under 392.2 - corrected the violation to 392.4a.
 BTurner 05/04/2011

Received written hearing request. See Image Now. - cb 6-7-11

Special Study Fields:

Special Study1:	Special Study6:
Special Study2:	Special Study7:
Special Study3:	Special Study8:
Special Study4:	Special Study9:
Special Study5:	Special Study10:

* Pursuant to the authority contained in Title 49, CFR; K.S.A. 66-1,129; K.C.C. Reg. 82-4-3, I hereby declare DOMINIC A. ANTHONY "OUT OF SERVICE". No person and/or carrier shall permit and/or require this driver to operate any commercial vehicle until: 24 Consecutive Hours Off Duty. This Out of Service condition may result in the assessment of a Civil Penalty being issued against the Carrier indicated on this report. Driver Initials _____

**** DRIVER: THIS FORM IS REQUIRED TO BE RETURNED TO THE CARRIER BY REGULATION. **** *CARRIER CERTIFICATION: All defects on this sheet must be corrected or acknowledged PRIOR TO RE-DISPATCH and then certified by a responsible carrier official who must sign below. RETURN THIS FORM WITHIN 15 DAYS to the Motor Carrier Division of the KANSAS HIGHWAY PATROL at the address listed at the top of this form.

Signature of Carrier Official: X Date: _____

* NOTE TO MECHANIC: The undersigned certifies that all mechanical defects listed on this report HAVE BEEN CORRECTED at the time of signature.

Report Prepared By: B.K. Smith **Badge #:** 0174 **Copy Received By:** ANTHONY, DOMINIC A **Page 1 of 2**



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Signature of Repairer: X Facility: _____ Date: _____

Report Prepared By:
B.K. Smith

Badge #:
0174

Copy Received By:
ANTHONY, DOMINIC A

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X _____

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