

USDOT/FMCSA

SAFETY AUDIT CORRECTIVE ACTION PLAN (CAP) GUIDANCE



**U.S. DEPARTMENT OF TRANSPORTATION
FEDERAL MOTOR CARRIER SAFETY ADMINISTRATION
SOUTHERN SERVICE CENTER
Fax Number: 877-547-0380
SSCCAP@DOT.GOV**

If you have any questions regarding this matter, you may contact the Southern Service Center at (404) 327-7351.

Corrective Action Plan (CAP) Submission Coversheet

This coversheet, or similar type of coversheet, should be submitted when submitting the carrier's Corrective Action Plan (CAP). It will assist with the processing of your CAP.

Carrier's USDOT: _____

Carrier's Legal Name: _____

Date of Safety Audit: _____

Carrier's Key CAP Contact Name(s), Position(s), and Telephone Numbers(s):

The motor carrier must submit their CAP by using the below email address, fax number, or mailing address:

Email Address:
SSCCAP@DOT.GOV

Fax Number:
1-877-547-0380
Attention:
Joel Hiatt
C/O Erica De La Torre

Mailing Address:
U.S. Department of Transportation,
Federal Motor Carrier Safety Administration,
Southern Service Center,
Joel Hiatt, Service Center Director,
C/O Erica De La Torre, New Entrant Specialist,
1800 Century Blvd, Suite: 1700
Atlanta, GA 30345

When you submit your CAP, you should keep a copy of your return receipt if mailed or a copy of the confirmation page if facsimiled or electronically mailed as your proof of submission.

Title 49 CFR section 385.319(c) of the Federal Motor Carrier Safety Regulations (FMCSRs) states that if a New Entrant motor carrier's safety controls are inadequate, its USDOT new entrant registration will be revoked and its operations placed out-of-service unless the new entrant takes actions to remedy its safety management practices. Section 385.319(c)(1) states that a new entrant has *60-days* from the date of written notice that the new entrant failed the safety audit to submit corrective action acceptable to the agency if the new entrant *IS NOT* a carrier of passengers or hazardous materials requiring placards. Section 385.319(c)(2) states that the new entrant has *45-days* from the date of written notice that the new entrant failed the safety audit to submit corrective action acceptable to the agency if the new entrant *IS* a carrier of passengers or hazardous materials requiring placards. Please review 49 CFR Part 385 Subpart D of the FMCSR for further information. Your Corrective Action Plan Submission must be submitted in writing. You should keep a copy of your confirmation page if facsimiled or electronically mailed as your proof of submission. **Your response must show the USDOT#, name and a copy of your notice.*

Fax Number:

1-877-547-0380 Attention: Joel Hiatt C/O Erica De La Torre

Email Address: SSCCAP@DOT.GOV

The corrective action plan submission should include, but is not limited to the following requirements (1-8):

1. Address each violation on the Safety Audit Report that resulted in the Safety Audit failure and the accident rate when the accident rate is part of the failure, and discuss the actions taken to correct the deficiency or deficiencies that resulted in the Safety Audit failure. Documentation of this corrective action must be submitted with the submission. Use the CAP Template as guidance when submitting the required documentation.
2. Identify why the violation(s) that resulted in the Safety Audit failure occurred.
3. Discuss the actions taken to ensure all violations which resulted in the Safety Audit failure will not reoccur.
4. If the accident rate shows failed, an accident countermeasure program must be included as part of the submission. The program should include, but not be limited to, defensive driving training, identification of causative factors, and preventive measures implemented to reduce crashes.
5. If the corrective action plan includes actions that will be conducted in the near future, such as training, reorganization of departments, purchasing of computer programs, etc., a detailed description of the activity or training (specific curriculum), and a schedule of when that activity will commence and when it will be completed, should be included.
6. Any additional documentation you believe demonstrates adequate safety management controls and specifically relates to the Safety Audit failure should also be included with the submission.
7. The corrective action plan must include a written statement certifying that the carrier will operate in compliance with the FMCSRs and the Hazardous Material Regulations, and that the motor carrier's operation currently meets the safety standard found in the FMCSRs, 49 CFR. §§ 385.5, 385.7. The statement must be signed by a corporate officer or owner of the company.
8. The CAP must be submitted and received within 15 days from the date of written notice that the new entrant failed the Safety Audit to ensure the FMCSA has sufficient time to review the CAP. **Failure to submit the CAP within the 15 day time period may prevent the FMCSA from issuing a decision before the revocations and out-of-service orders in section 385.325 take effect.**

NOTE: Failing to adequately respond to each area listed above will result in the carrier's USDOT New Entrant registration being revoked and operations placed out-of-service.

The Education and Technical Assistance (ETA) information entitled "A Motor Carrier's Guide to Improving Highway Safety" is available at FMCSA's website: <http://www.fmcsa.dot.gov/safety-security/eta/index.htm>

For the entire 49 CFR Part 385 regulations, please consult the Code of Federal Regulations.



**U.S. DEPARTMENT OF TRANSPORTATION
FEDERAL MOTOR CARRIER SAFETY ADMINISTRATION
SOUTHERN SERVICE CENTER
Phone Number: 404-327-7351
Fax Number: 877-547-0380
Email: SSCAP@DOT.GOV**

Carrier's USDOT: _____

Safety Audit Automatic Failure Corrective Action Supporting Document requirements:

The corrective action plan should include, but is not limited to the following 1-9 requirements:

1. Address each violation on the Safety Audit Report that resulted in the Safety Audit failure and the accident rate when the accident rate is part of the failure, and discuss the actions taken to correct the deficiency or deficiencies that resulted in the Safety Audit failure. Documentation of this corrective action must be submitted with the submission. Use the CAP Template as guidance when submitting the required documentation.

2. Identify why the violation(s) that resulted in the Safety Audit failure occurred.

3. Discuss the actions taken to ensure all violations which resulted in the Safety Audit failure will not reoccur.

4. If the accident rate shows failed, an accident countermeasure program must be included as part of the submission. The program should include, but not be limited to, defensive driving training, identification of causative factors, and preventive measures implemented to reduce crashes.

5. If the corrective action plan includes actions that will be conducted in the near future, such as training, reorganization of departments, purchasing of computer programs, etc., a detailed description of the activity or training (specific curriculum), and a schedule of when that activity will commence and when it will be completed, should be included.

6. Any additional documentation you believe demonstrates adequate safety management controls and specifically relates to the Safety Audit failure should also be included with the submission.

7. The corrective action plan must include a written statement certifying that the carrier will operate in compliance with the FMCSRs and the Hazardous Material Regulations, and that the motor carrier's operation currently meets the safety standard found in the FMCSRs, 49 CFR. §§ 385.5, 385.7. The statement must be signed by a corporate officer or owner of the company.

8. The CAP must be submitted and received within 15 days from the date of written notice that the new entrant failed the Safety Audit to ensure the FMCSA has sufficient time to review the CAP. Failure to submit the CAP within the 15 day time period may prevent the FMCSA from issuing a decision before the revocations and out-of-service orders in section 385.325 take effect.

Compliance Certification:

X-----	-----	-----
Signature corporate official or president	Title	Date

NOTE: Failing to adequately respond to each area listed above will result in the carrier's USDOT New Entrant registration being revoked and operations placed out-of-service.

Safety Audit Cited Questions/Violation(s)
(49 CFR Section):

Appropriate supporting documentation should include, but is not limited to:

<p>General 1: 387.7(a) General 2: 387.7(d) General 3: 387.31(a) General 4: 387.31(d)</p>	<p>You must submit compelling evidence to show that carrier has taken the appropriate steps to comply with 49 CFR Part 387 including information that demonstrate appropriate amounts of financial responsibility are in place. -Proof of Insurance: MCS-90 form (Motor Carriers of Property) or MCS-90B form (Motor Carriers of Passengers) or A written decision, order, or authorization of FMCSA authorizing a motor carrier to self-insure.</p>
<p>General 7: 390.15(b)(2)</p>	<p>Copies of accident report(s) for the past one (1) year as required by 49 CFR section 390.15(b) (2).</p>
<p>Driver 1: 391.51(a)</p>	<p>Complete driver qualification files; Up to three (3) files which include newly hired drivers if applicable.</p>
<p>Driver 2: 391.11(b)(4) Driver 3: 391.45(a)/391.45(b)</p>	<p>You must submit compelling evidence to show that carrier has taken the appropriate steps to comply with 49 CFR Part 391.11(b)(4) including information that demonstrates the driver(s) in violation has: -A current and valid medical examination certificates and if applicable, proof of waiver and/or exemption (SPE Certificate) issued by the Agency.</p>
<p>Driver 4: 391.15(a)</p>	<p>You must submit compelling evidence to show that carrier has taken the appropriate steps to comply with 49 CFR Part 391.15(a) including information that demonstrates the driver(s) in violation has a current and valid driver's license. This information shall include a copy of: -Evidence, i.e. copy of driver's record (Current MVR) or CDL, showing that the specific driver is no longer disqualified and the issue has been resolved; if employee has been terminated, company must submit a written statement providing date of termination.</p>
<p>Driver 5: 391.51(b)(2)</p>	<p>Up to three driving records for the past three years for each driver.</p>

<p>Driver 6: 382.115(a)/382.115(b)— (domestic/foreign motor carriers)</p>	<p>You must submit compelling evidence to show that carrier has taken the appropriate steps to comply with 49 CFR Part 382. Your CAP submission must include:</p> <ol style="list-style-type: none"> 1) Evidence showing that the carrier is participating in a Random Testing Program as required by 49 CFR Part 382. Evidence could include certificate from the consortium or signed contract agreement with consortium/third party administrator (C/TPA) and/or collection site (if applicable). 2) Up to three; pre-employment test(s) on all drivers Custody Control Forms (CCF). These tests MUST be USDOT compliant tests 3) Up to three; related pre-employment test results, 4) A copy of the carrier's written Controlled Substances and Alcohol Testing Policy as required 49 CFR Section 382.601(b). 5) Evidence that all designated supervisors have received the required Supervisor Training as required by 382.603. Supervisor reasonable suspicion training if applicable, 6) Breath Alcohol Testing Form (BAT) policy, 7) Active random driver list: the list provided by the consortium of carrier's drivers currently enrolled in the Controlled Substances and Alcohol Random testing program pool. 8) Copies of any random controlled substance and/or alcohol tests conducted on drivers subject to 49 CFR Part 382 (if applicable). These tests MUST be USDOT compliant tests with results.
<p>Driver 7: 382.213(b) Driver 8: 382.215 Driver 9: 382.201 Driver 10: 382.505(a) Driver 19: 382.211 Driver 20: 382.503 Operation 16:392.4(b)-use Operation 17: 392.5(b)(1)-use Operation 18: 392.5(b)(2)</p>	<ol style="list-style-type: none"> 1) A copy of the carrier's written Controlled Substances and Alcohol Testing Policy as required 49 CFR Section 382.601(b). 2) Evidence that all designated supervisors have received the required Supervisor Training as required by 382.603. <p>If applicable to your operation, the following items needs to be submitted along with items 1 and 2 above:</p> <p>In cases where it is anticipated that the driver is going to drive again: 1) SAP evaluation, 2) Evidence of a return to duty test, 3) SAP's written follow-up testing plan as required by 49 CFR Section 40.307, 4) Follow-up tests results.</p> <p>In cases where the employee has been terminated, carrier must submit a written statement providing date of termination.</p> <p>In cases where the driver is not driving, carrier must submit a written statement regarding the fact.</p>
<p>Driver 11: 382.301(a)</p>	<ol style="list-style-type: none"> 1) Pre-employment drug tests: up to three tests which include newly hired drivers if applicable. 2) Each related pre-employment test result, 3) Custody and Control Forms (CCF).

<p>Driver 12: 382.303(a) Driver 13: 382.303(b) Operation 15: 392.9(a)(1) Operation 16: 392.4(b) - possession Operation 17: 392.5(b)(1) - possession</p>	<p>1) Copy of the carrier's written Controlled Substances and Alcohol Testing Policy as required 49 CFR Section 382.601(b). 2) Statement outlining how the discovered violation was handled.</p>
<p>Driver 14: 382.305 Driver 15: 382.305(b)(1) Driver 16: 382.305(b)(2)</p>	<p>You must submit compelling evidence to show that carrier has taken the appropriate steps to comply with 49 CFR Part 382.305. Your CAP submission must include: 1) Evidence showing that the carrier is participating in a Random Testing Program as required by 49 CFR Part 382. Evidence could include certificate from the consortium or signed contract agreement with consortium/third party administrator (C/TPA) and/or collection site if applicable. 2) Active random driver list: The list provided by the consortium of carrier's drivers currently enrolled in the Controlled Substances and Alcohol Random testing program pool. Include information on how the random pool is administered. 3) Copies of any random controlled substance and/or alcohol tests Custody and Control forms (CCF) conducted on drivers subject to 49 CFR Part 382 (if applicable). These tests MUST be USDOT compliant tests. 4) Each related submitted controlled substance test results.</p>
<p>Driver 21: 383.23(a) Driver 22: 383.37(a) Driver 23: 383.51(a)</p>	<p>You must submit compelling evidence to show that company has taken the appropriate steps to comply with 49 CFR Part 382.23(a). Your CAP submission must include: -State Motor Vehicle Records showing issue has been resolved. Evidence, i.e. copy of driver's record or CDL showing that the specific driver's issue has been resolved, if employee has been terminated, carrier must submit a written statement providing date of termination. If vehicle does not require CDL, submit such relevant evidence.</p>
<p>Operation 2: 395.8(a) Operation 3: 395.8(i)</p>	<p>You must submit compelling evidence to show that carrier has taken the appropriate steps to comply with 49 CFR Part 395.8(a). Your CAP submission must include: 1) 30 consecutive days of records of duty status or time cards (if applicable) on each driver for up to 3 drivers. 2) A detailed description of your system for monitoring and controlling Hours of Service (HOS) and verifying the accuracy of drivers' records of duty status (RODS) or Time Cards.</p>
<p>Operation 4: 395.8(k)(1)</p>	<p>1) 30 consecutive days of records of duty status or time cards (if applicable) on each driver for up to 3 drivers. 2) Evidence that supporting documents are maintained, for example, fuel receipts, toll receipts, etc.</p>

<p>Operation 5: 395.3(a)(1) Operation 6: 395.3(a)(2) Operation 7: 395.3(b)(1) Operation 8: 395.3(b)(2) Operation 9: 395.5(a)(1) Operation 10: 395.5(a)(2) Operation 11: 395.5(b)(1) Operation 12: 395.5(b)(2) Operation 13: 395.8(e)</p>	<p>Evidence of corrective action consisting of description of the system that the carrier will use to control hours of service and verify the accuracy of records of duty status, the types of supporting documents that will be used, documentation showing hours of service checks and false log checks, and the results.</p>
<p>Operation 14: 392.2</p>	<p>1) A Company Policy currently in place to prevent drivers and key company personnel from allowing an operation of CMV in violation of State and Local Laws. 2) Statement outlining how the discovered violation was handled.</p>
<p>Operation 15: 392.9(a)(1)</p>	<p>1) A Company Policy currently in place to prevent drivers from allowing an operation of CMV in violation of Load Securement. 2) Description of any Company training in Proper Load Securement for your drivers. 3) Statement outlining how the discovered violation was handled.</p>
<p>Maintenance 1: 396.3(b)</p>	<p>1) Complete vehicle maintenance files; up to three. 2) Preventive Maintenance Plan; means or schedule of maintenance plan that indicates the nature and due date of the various inspection and maintenance operations to be performed.</p>
<p>Maintenance 2: 396.17(a)</p>	<p>You must submit compelling evidence to show that carrier has taken the appropriate steps to comply with 49 CFR Part 396.17(a). Your CAP submission must include: -Copies of vehicle annual (periodic) inspection reports or equivalent required under Part 396.17 for all commercial motor vehicles under your control; up to three.</p>
<p>Maintenance 3: 396.11(a)</p>	<p>30 days of driver vehicle inspection reports on each vehicle; up to three vehicles.</p>
<p>Maintenance 4: 396.11(c)</p>	<p>You must submit compelling evidence to show that carrier has taken the appropriate steps to comply with 49 CFR Part 396.11(c). Your CAP submission must include: -The driver vehicle inspection report(s) (DVIR) found in violation and documentation that the "out-of-service" defect(s) or deficiency (ies) was repaired.</p>
<p>Maintenance 5: 396.9(c)(2)</p>	<p>You must submit compelling evidence to show that carrier has taken the appropriate steps to comply with 49 CFR Part 396.9(c)(2). Your CAP submission must include: -Documentation that the out-of-service violation(s) was repaired.</p>

Hazardous Materials (HM) 2: 171.15 HM 3: 171.16	Submit and retain a copy of the Hazardous Materials Incident Report on DOT Form F 5800.1, which can be downloaded from www.phmsa.dot.gov under incident reporting. The form can also be submitted online.
HM 4: 177.800(c)	Description of training plan provided to employees involved with hazardous materials. Documentation that personnel received the training; up to three personnel.
HM 6: 177.817(a)	An example of properly prepared shipping papers for each class of hazardous materials carrier carries or/and ships.
HM 7: 177.817(e) HM 8: 177.841(e) HM 14: 397.5(a) HM 15: 397.7(a)(1) HM 16: 397.7(b) HM 17: 397.13(a) HM 18: 397.19(a)	Statement outlining how the discovered violation was handled.
HM 10: 180.407(a) HM 11: 180.407(c)	Copies of the inspection and testing reports; up to three units.
HM 12: 180.415	Evidence (e.g. pictures, video) that the vehicles' inspection and testing markings are shown as required; up to three units.
HM 13: 180.417(a)(1)	Copies of specification cargo tank's manufacturer certificate, the manufacturer's ASME U1A data report, where applicable and required related documents; up to three DOT specification cargo tank.
HM 19: 397.67(d)/397.101(d)	1) Statement outlining how the discovered violation was handled. 2) Evidence consisting of an example of route plan materials.