

ESCORT PRE-TRIP CHECKLIST

Crosscheck the actual information with the corresponding information noted on the permit. Contact Central Permits at 785-368-6501 if any discrepancies are noted. Completing this form accurately and completely is the responsibility of the escort vehicle operators. It is required that this form be completed before each move and retained by the escort vehicle service provider for at least three (3) years following the date the move ended. It is very likely that the escort vehicle operator(s) will be asked to produce this form if an accident or incident occurs involving the transportation of the load.

	Name	Phone	Certification Number	
Escort Vehicle Operators				
Permit #	Load Dimensions			
	Width		Length	
	Height		Weight	
Escort Vehicle Service Provider	Address		City, State, Zip	
Truck Driver's Name	Beginning of Move		End of Move	
	Date	Time	Date	Time
OPERATOR REQUIREMENTS				CHECKED?
1.	Are all escort vehicle operators 18 years of age or over and properly licensed to operate the vehicle?			Yes <input type="checkbox"/> No <input type="checkbox"/> N.A. <input type="checkbox"/>
2.	Do operators of the escort vehicles understand the requirements shown on the permit and/or bridge analysis?			Yes <input type="checkbox"/> No <input type="checkbox"/> N.A. <input type="checkbox"/>
3.	Does each escort vehicle operator know that failure to comply with these regulations may result in the revocation of the registration of the escort vehicle service provider?			Yes <input type="checkbox"/> No <input type="checkbox"/> N.A. <input type="checkbox"/>
4.	Does each escort vehicle operator know they are responsible for ensuring oversize or overweight loads are transported safely to the approved destination?			Yes <input type="checkbox"/> No <input type="checkbox"/> N.A. <input type="checkbox"/>
5.	Does each escort vehicle operator know unauthorized equipment cannot be carried on the vehicle such as those generally reserved for law enforcement personnel?			Yes <input type="checkbox"/> No <input type="checkbox"/> N.A. <input type="checkbox"/>
6.	Does everyone understand the instructions on the permit?			Yes <input type="checkbox"/> No <input type="checkbox"/> N.A. <input type="checkbox"/>
7.	Does the driver of the transporting vehicle know that failure to comply with these regulations may result in the inability of the company to get permits in the future?			Yes <input type="checkbox"/> No <input type="checkbox"/> N.A. <input type="checkbox"/>
8.	Does the driver of the transporting vehicle understand all regulations?			Yes <input type="checkbox"/> No <input type="checkbox"/> N.A. <input type="checkbox"/>

9.	Are the proper number of escort vehicle operators available as required by regulation when escorting a superload, large structure, or loads greater than 14 feet?	Yes <input type="checkbox"/> No <input type="checkbox"/> N.A. <input type="checkbox"/>
10.	Has a copy of the escort certification been placed in the escorting vehicle(s), if applicable?	Yes <input type="checkbox"/> No <input type="checkbox"/> N.A. <input type="checkbox"/>
11.	If an escort vehicle operator must leave, the transporting vehicle shall be prevented from moving until another certified escort vehicle operator can be located, even if this results in substantially delaying the delivery of the load.	Yes <input type="checkbox"/> No <input type="checkbox"/> N.A. <input type="checkbox"/>
12.	Is each driver/operator able to communicate verbally with each other, using two-way equipment?	Yes <input type="checkbox"/> No <input type="checkbox"/> N.A. <input type="checkbox"/>
13.	Is each escort vehicle operator aware that a trailer may not be towed by the escort vehicle at any time while escorting loads?	Yes <input type="checkbox"/> No <input type="checkbox"/> N.A. <input type="checkbox"/>
14.	Is everyone aware of what needs to be done at bridges and at critical locations?	Yes <input type="checkbox"/> No <input type="checkbox"/> N.A. <input type="checkbox"/>
15.	Is the driver of the transporting vehicle completely familiar with the approved route?	Yes <input type="checkbox"/> No <input type="checkbox"/> N.A. <input type="checkbox"/>
16.	Is the driver of the transporting vehicle familiar with the trailing equipment?	Yes <input type="checkbox"/> No <input type="checkbox"/> N.A. <input type="checkbox"/>
EQUIPMENT		CHECKED?
1.	Is a height pole constructed of a non-conducting material attached to front of the lead escort vehicle?	Yes <input type="checkbox"/> No <input type="checkbox"/> N.A. <input type="checkbox"/>
2.	Is the height pole set at a height to ensure the transporting vehicle can pass safely under all structures, including power lines?	Yes <input type="checkbox"/> No <input type="checkbox"/> N.A. <input type="checkbox"/>
ESCORT VEHICLES		CHECKED?
1.	Is each of the escort vehicles properly equipped with the equipment required by regulation?	Yes <input type="checkbox"/> No <input type="checkbox"/> N.A. <input type="checkbox"/>
2.	Does each escort vehicle have an "OVERSIZE LOAD" sign attached as required by regulation?	Yes <input type="checkbox"/> No <input type="checkbox"/> N.A. <input type="checkbox"/>
3.	Is the company information prominently displayed on each escort vehicle?	Yes <input type="checkbox"/> No <input type="checkbox"/> N.A. <input type="checkbox"/>
4.	Are any enforcement escorts required?	Yes <input type="checkbox"/> No <input type="checkbox"/> N.A. <input type="checkbox"/>
5.	Are any bucket trucks needed?	Yes <input type="checkbox"/> No <input type="checkbox"/> N.A. <input type="checkbox"/>
6.	Are warning lights attached to the top of each escort vehicle?	Yes <input type="checkbox"/> No <input type="checkbox"/> N.A. <input type="checkbox"/>
LOAD		CHECKED?
1.	Is the load secured in such a fashion nothing will come loose, dislodge, or fall off the transporting combination and load?	Yes <input type="checkbox"/> No <input type="checkbox"/> N.A. <input type="checkbox"/>
MISCELLANEOUS		CHECKED?
1.	Are all applicable phone numbers and other necessary information readily available in case of an emergency?	Yes <input type="checkbox"/> No <input type="checkbox"/> N.A. <input type="checkbox"/>
2.	Is a cell phone available that is properly charged?	Yes <input type="checkbox"/> No <input type="checkbox"/> N.A. <input type="checkbox"/>

3.	Are all escort vehicle operators and the driver of the transporting vehicle able to maintain radio contact with each other during the entire move?	Yes <input type="checkbox"/> No <input type="checkbox"/> N.A. <input type="checkbox"/>
4.	Have all the appropriate electrical and railroad companies been contacted before moving?	Yes <input type="checkbox"/> No <input type="checkbox"/> N.A. <input type="checkbox"/>
5.	Has the first KDOT official shown on the KDOT "Superload Permit" or "Large Structure Permit" been informed that the load is moving?	Yes <input type="checkbox"/> No <input type="checkbox"/> N.A. <input type="checkbox"/>
6.	Have all the special restrictions noted on the permit been met?	Yes <input type="checkbox"/> No <input type="checkbox"/> N.A. <input type="checkbox"/>
PERMIT INFORMATION		CHECKED?
1.	Are the dimensions of the vehicle and load compatible with the dimensions shown on the approved permit?	Yes <input type="checkbox"/> No <input type="checkbox"/> N.A. <input type="checkbox"/>
2.	Does everyone involved with transporting the load have copies of the valid superload permit?	Yes <input type="checkbox"/> No <input type="checkbox"/> N.A. <input type="checkbox"/>
3.	Superload: Have all concerns involving the superload permit and any confusing transportation issues been resolved entirely before proceeding with the movement of the superload?	Yes <input type="checkbox"/> No <input type="checkbox"/> N.A. <input type="checkbox"/>
4.	Have all necessary local and county permits been obtained?	Yes <input type="checkbox"/> No <input type="checkbox"/> N.A. <input type="checkbox"/>
ROUTING		CHECKED?
1.	Have all the critical areas along the route been identified?	Yes <input type="checkbox"/> No <input type="checkbox"/> N.A. <input type="checkbox"/>
2.	Have all potential hazards along the trip been identified and adequately discussed before moving?	Yes <input type="checkbox"/> No <input type="checkbox"/> N.A. <input type="checkbox"/>
3.	Have all railroad tracks and other roadway surfaces that are not at-grade been identified and is there a sufficient amount of under-clearance to keep the vehicle and load from becoming high-centered or stalled anywhere along the route?	Yes <input type="checkbox"/> No <input type="checkbox"/> N.A. <input type="checkbox"/>
4.	Was a route survey performed? Does everyone have a copy?	Yes <input type="checkbox"/> No <input type="checkbox"/> N.A. <input type="checkbox"/>

SIGNATURES	
Escort Vehicle Operator Completing the Report	Escort Vehicle Operator Verifying Data is True and Complete
Print:	Print:
Sign:	Sign:

ESCORT VEHICLE OPERATORS POST-TRIP REPORT

Please describe any problems/restrictions you experienced during the move. For each problem, enter how the problem was resolved. If everything went well during the move, indicate so by checking the appropriate box below. It is required this form be retained by the escort vehicle service provider for at least three (3) years following the date the move ended.

Origin:		Starting Date:	
Destination:		Ending Date:	
PROBLEMS		SOLUTIONS	
1		1	
2		2	
3		3	
4		4	
5		5	
6		6	
7		7	
8		8	
<input type="checkbox"/>	Conducted a Pre-trip meeting with all involved in the move (required)	<input type="checkbox"/>	No problems were encountered during the move
<input type="checkbox"/>	The move was made in accordance with all applicable OSOW regulations and the bridge memorandum (required)	<input type="checkbox"/>	Front and rear escorts were provided at all times with the move

SIGNATURES

Escort Driver #1 (Person preparing the report)

Certification # (State)

Date

Escort Driver #2 (Person verifying the accuracy of the information)

Certification # (State)

Date