Partners in Compliance	Pre-Qualification Survey		Prepared By:	Approval:
in Compliance			PIC Team	Advisory Council: 02/20/2018
			Revision NO.	Approval:
Document Number AMTA-PIC-FM-02	Document Classification: Controlled	Document Level: L4 Forms		Standards Committee: 01/10/2018

Co	mpany Name:				
	MVID#:				
С	ontact Name:				
Pŀ	none Number:			-	
	l				
1.0 PF	RE-QUALIFICA	ATION SURVEY			
1.	Do you have a	an NSC number?		Yes	No
	Please provide	e your NSC numb	er:		
	Please provide	e your operating s	status:		
	Please provide	e your Safety Fitn	ess Rating:		
2.	•		mpleted by a certified 3 rd an acceptable score?	•	itor within No
	Please provide	e your Audit Score	e:		
			(10% or less in vi	olation req	uired)
3.	If accepted as		are you prepared to pro	vide a full o	opy of the
4.	Do you have a	a current Certifica	te of Recognition (COR)	? Yes	No
	Please provide	e COR Cert. numb	oer (if applicable):		
	Please provide (no less than		(if applicable):		
5.		red to submit act	ion plans verifying deficiessed?	iencies in ye Yes	our current No





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6. Does your company have a procedure for monitoring WCB Lost Time Claims?

Yes No

7. Please provide your R-Factor as documented on your Carrier Profile

8. Do you feel your company can meet the expectation of a PIC member for the Out of Service benchmark of less than 21% (Truck) or less than 12% (Bus) consistently?

Yes No

(refer to part 3 of your Carrier Profile)

9. Do you feel your company can meet the expectation of a PIC member for the Hours of Service benchmark of less than 2.9% for Fatigue Violations and less than 5.9% for Form and Manner Violations, consistently?

Yes No

10. Have you been on monitoring with Carrier Services in the past 12-months?

Yes No

2.0 DOCUMENT CHANGE RECORD TABLE

Revision Number	Effective Date	Responsible	Part Affected/ Document#	Description of Change
001	08/27/2019	SF	AMTA-PIC-FM-02	Add Contact Name and Number



