

## FITNESS EVALUATION FORM

Company Name:	Address:
Safety Fitness Reviewer:	
Does the applicant meet the minimum level of fitness for this classification approval?	<b>YES</b> <b>NO*</b>
*If NO, Why?	
COMMENTS:	

Is the applicant requesting authorization(s) for classification or transport of the materials indicated below:	
Explosives (Class 1.1, 1.2, 1.3, or 1.4)	<b>YES</b> <b>NO</b>
Division 4.1	<b>YES</b> <b>NO</b>
Division 5.1	<b>YES</b> <b>NO</b>
Division 5.2	<b>YES</b> <b>NO</b>

In the 5-year period prior to the application, the applicant has been involved, directly or indirectly, in the type and number of hazardous materials incidents below:	
More than 1 "serious incident" involving any hazardous material:	<b>YES</b> <b>NO</b>
More than 1 hazardous material incident involving any § 172.504 Table 1 and any material listed above:	<b>YES</b> <b>NO</b>
More than 1 hazardous material incident involving a cargo tank, motor vehicle, railroad tank car, or other bulk packaging:	<b>YES</b> <b>NO</b>
More than 2 hazardous materials incidents involving any § 172.504 Table 2 materials in intermediate bulk or portable tank packaging:	<b>YES</b> <b>NO</b>
More than 30 hazardous materials incidents involving any § 172.504 Table 2 materials in non-bulk packagings:	<b>YES</b> <b>NO</b>

In the 5-year period prior to the application, the applicant has received:	
Four civil enforcement cases:	<b>YES</b> <b>NO</b>
Four warning letters:	<b>YES</b> <b>NO</b>
A combination totaling four civil enforcement cases and/or warning letters:	<b>YES</b> <b>NO</b>

SAFER REVIEW:	
A Motor Carrier Safety Rating of less than satisfactory according to the Federal Motor Carrier Safety Administration's Safety and Fitness Electronic Records System (SAFER):	<b>YES</b> <b>NO</b>
A HAZMAT. F t&gt;."qt "Xgj l&gt;g Out-of-Service percentage of greater than the national cxgtci g'ceeqtf lpi "q'SAFER:	<b>YES</b> <b>NO</b>