DUPLICATE:

NATIONAL DRIVER WORK DIARY DAILY SHEET

SECURITY NO:

Driver's Name:

Licence No:

State/Territory Issued:

BFM/AFM Accreditation No:

BFM/AFM drivers only.

Date: ___/___/___

Day of the Week: S M T W T F S

Time Zone:

State/Territory (Driver Base)

Pre-trip check (optional): ☐ Time:

Tick the work/rest option for this daily sheet only

Solo driver work/rest options: ☐ Standard ☐ Standard (Bus) ☐ BFM ☐ AFM

Two-up driver work/rest options: ☐ Standard ☐ BFM ☐ AFM

Work/rest hours exemption: ☐ (if applicable)

DETAILS OF ACTIVITIES
record at start and end of day and at change of activity and/or heavy vehicle

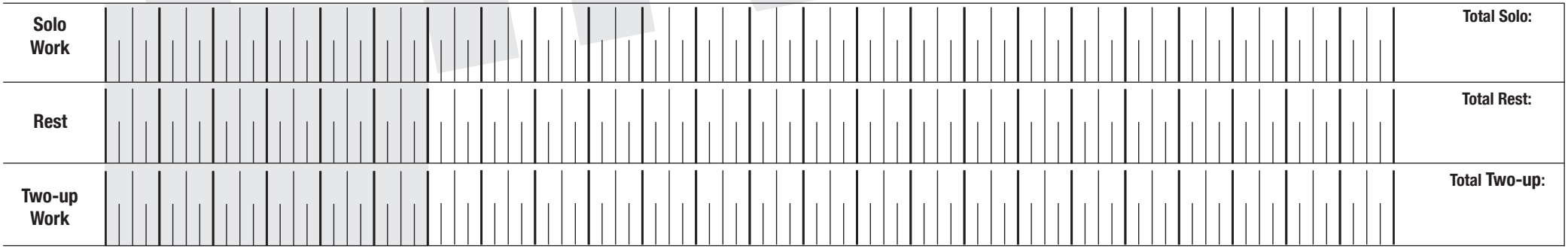
Number Plate
(record at start & end of day & at work/rest change & vehicle change)

Odometer Reading
(record at start & end of day & at work/rest change & vehicle change)

Name of Location at Work/Rest Change
(rest area, truck stop, suburb, or town)

midnight 1 2 3 4 5 6 7 8 9 10 11 noon 1 2 3 4 5 6 7 8 9 10 11 midnight

All drivers: calculate totals



Driver Signature:

By signing this daily sheet you verify the information given is true and correct in every detail.

YOU MUST SIGN THIS PAGE BEFORE STARTING A NEW DAILY SHEET

Two-up Driver Name:

Licence No:

Work Diary No:

State/Territory Issued:

Two-up Driver Signature:

By signing this sheet you verify the information given is true and correct in every detail.

FINAL