U.S. Department of Transportation Federal Motor Carrier Safety Administration

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Fleet Manager Survey

Thank you for your participation in the Commercial Driver Individual Differences Study. This questionnaire will take approximately 10 minutes to complete and requests basic demographic and safety information about your truck fleet. There are no right or wrong answers, please just answer all the questions to the best of your ability by circling the letter(s) associated with your answer. Please note the information you provide will be anonymous.

1. Descri	ption of carrier (circle all that apply):
a.	For-hire: truckload
b.	For-hire: less-than-truckload
c.	For-hire: regional
d.	For-hire: tanker
e.	Private: truckload
f.	Private: less-than-truckload
g.	Private: regional
h.	Private: tanker
i.	Owner-operator: truckload
j.	Owner-operator: less-than-truckload
k.	Owner-operator: regional
1.	Owner-operator: tanker
m.	Intermodal services
n.	Dedicated operations
0.	Other:

Carrier ID#: _____

2.	Numbe	er of power units (circle one):
	a.	1-10 power units
	b.	11 – 50 power units
	c.	51 – 100 power units
	d.	101 – 500 power units
	e.	501 – 1,000 power units
	f.	1,001 or more power units
3.	Averag	ge length of haul (circle one):
	a.	1 to 49 miles
	b.	50 to 99 miles
	c.	100 to 199 miles
	d.	200 to 499 miles
	e.	500 or more miles
4.	Primar	y commodities (circle all that apply):
	a.	General freight truckload
	b.	General freight less-than-truckload
	c.	Building materials
	d.	Hazardous chemicals
	e.	Processed foods
	f.	Heavy machinery
	g.	Refined petroleum products
	h.	Automotive parts or vehicles
	i.	Forest products
	j.	Farm fresh products
	k.	Household goods
	1.	Retail store – grocery delivery
	m.	Raw petroleum products
	n.	Bulk – dump truck
	0.	Parcels

5. Number of regular, full-time drivers (circle one):

p. Mine oresq. Other: ____

- a. 1-20 regular, full-time employees
- b. 21 100 regular, full-time employees
- c. 101 500 regular, full-time employees
- d. 501 1,000 regular, full-time employees
- e. 1,001 5,000 regular, full-time employees
- f. 5,000 or more regular, full-time employees

6.	a. l b. l c. l d. a	are drivers compensated (circle all by the mile by the hour by the load activity based pay (stops/trips) other (please indicate)	
6. l	Do dri	vers receive health insurance bene-	fits through your carrier (circle one)?
		Yes / No	
		If "Yes", please list the specific b provider):	-
7.]	Do dri	vers receive retirement benefits the Yes / No	
		If "Yes", please list the specific b	enefits:
9. 1		s your carrier insured (circle one)? Self-insured	
		Private insurance	
	c.	Other (please indicate)	
2	collisio you cu	on warning systems, and electronic	e.g., lane departure warning systems, forward e stability control systems, Xata, DriveCam, etc.) ks (list all that apply). If you do not have any sestion #11.
	a.	Make:	Model:
	b.		Model:
	c.		Model:
	d.	Make:	Model:

11. Do you have an active speed limiter on your trucks (circle one)?					
,	Yes / No				
]	If "Yes", what is the set speed:				
12. Does your company have a cell phone, text, and/or dispatching device policy (circle one)?					
,	Yes / No				
1	If "Yes", please list the specific policy/policies:				
a. 1 b. 2 d. 1 f. 3 f. 4 f. 1 j. 5 k. 1	Infety management techniques does your carrier employ? (choose all that apply): Driver finishing program Yearly training/re-training (general) New driver training How's my driving safety placards Require drivers to perform a pre/post trip truck inspection Safety incentives Fuel bonus Defensive driving training (e.g., smith system, etc.) Fatigue countermeasure training Ride alongs Spot checks, covert observations Health and wellness program/incentives Other:				
a. 6 b. 1 c. 1	perational techniques does your carrier employ? (choose all that apply): Charging fees for detention time Providing GPS aids with truck routing software Requiring drivers make a trip plane before departure Other:				

Thank you again for taking the time to complete this questionnaire! Please feel free to contact me if you have any questions regarding this project and or the information you provided. You can contact me at: jhickman@vtti.vt.edu