VIRGINIA POLYTECHNIC INSTITUTE AND STATE UNIVERSITY

Carrier Maintenance Manager Recruitment, Online Survey

Public Burden Statement

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Instructions:

This application will be used to identify contact information for you to complete a survey and to identify the type of experiences your carrier has had with regard to commercial vehicle maintenance. All answers provided in the survey will be de-identified. Personal and carrier information provided in this application will not be identified with your survey response.

Contact Information:

Name:		
	Email:	
	Phone Number:	
Carrier Name:		
	Carrier DOT Number:	

Application:

- 1. What is your current role in the Carrier?
 - O Technician (less than 10 years of experience)
 - O Technician, Expert (10 or more years of experience)
 - o Technician, Manager
 - o Mid-Level Manager, Maintenance and Technical Lead
 - o High-Level Manager, Maintenance/Technical/Operations Strategy
 - o Owner-Operator

	0	Carrier Owner, Not operator
	0	Other (please list):
2.	How r	nany years has your carrier been in operation?
3.	How r	nany power unit vehicles does your carrier operate? (select one)
	0	1
	0	2 to 6
	0	7 to 20
	0	21 to 100
	0	101 to 500
	0	501 or more
4.	What	types of vehicles does your carrier operate? (check all that apply)
		Single-unit trucks
		Tractor-truck power unit vehicles only
		Tractor-trailer vehicles
		Single-unit motor-coach buses
		School buses
		Other passenger vehicles (e.g., vans, mini buses)
5.	Has ye	our carrier been involved in a State or FMCSA intervention activity in the last 24
	month	s due in part to maintenance violations (e.g., warning letter, off-site investigation,
	on-site	e investigation)?
	0	Yes
	Ο	No