California State Legislative Board
Hours of Service – Violation Form

EMPLOYEE INFORMATION
Name: _____ Occupation: Engineer   Conductor
Name: _____ Occupation: Engineer   Conductor
Name: _____ Occupation: Brakeman

DOL Location
Subdivision: _____
Siding / MP: _____

Crew Trip Information:
Train ID: _____ On Duty Date: _____ Time: _____
Location: _____

Time Relieved from Service: _____
(This is the time that the dead head transportation departed to pick up crew)
(Relieved time must show after 12 hours on duty to be a violation)

Relief Information:
Relief Crew:
On duty Date, Time, and Location _____
Conductor: _____ Engineer: _____
Train ID: _____ Time Departed: _____

VAN: Time Departed: _____ Location Departed: _____

Time Released from Service (Tie-Up Time):
Time: _____ Date: _____Location: _____

Remarks as needed to explain Cause of HOS Violation:

_____
_____
_____
_____
_____
_____
_____
_____
_____
_____

Please submit completed form to your Legislative Representative