



## SUBHAULER/PULLER CHECK LIST

	Expiration Date	Initials	Comments
Subhaul Agreement (for current year)	_____	_____	_____
Subhaul Trailer Lease Agreement (if pulling MRT trailers)	_____	_____	_____
Certificate of Liability Insurance (Combined Single Limit No Less the 750,000 Per Accident)	_____	_____	_____
Insurance Additional Insured Endorsement Naming Mr. Trucker, Inc. As Additionally Insured	_____	_____	_____
Certificate of Worker's Compensation (if you have employees) Or Documented Partnership Agreement	_____	_____	_____
Worker's Compensation Declaration Form	_____	_____	_____
State of California Department of Motor Vehicles Motor Carrier Permit	_____	_____	_____
Motor Carrier of Property Certificate of Compliance (CHP 809)	_____	_____	_____
Biennial Inspection of Terminals (BIT) Proof of Compliance	_____	_____	_____
State of California Department of Motor Vehicles Employer) Pull Program Proof of Compliance (if you have employees)	_____	_____	_____
State of California Department of Motor Vehicles Letter or Certificate of Participation in a Random Drug and Alcohol Program (DOT 409 CFR Part 40)	_____	_____	_____
Random Drug & Alcohol Release of Liability Revision Form	_____	_____	_____
Taxpayer Identification Number Form	_____	_____	_____