

KINGSMEN COACH LINES, LLC.

Jeffrey L. Robinson, CPPA CPPS
Director of Purchasing & Property Management Divisions
Alabama A&M University
P.O. Box 1627
Normal, AL. 35762

July 5, 2016

Dear Mr. Robinson,

First and foremost we at Kingsmen Coach Lines would like thank you for give us the opportunity to bid on the transportation for the Marching Maroon and White Band of Alabama A&M.

In the bid proposal you will find all the information you requested. If you have any question or need more information feel free to call or e-mail.

Again Thanks.

Sincerely,



Bernard Barnes
Operations Manager
Cell 404-229-1434

1570 Cedar Grove Rd
P.O. box 661
Conley, GA. 30288

PHONE 404-362-9339
FAX 404-362-0254
EMAIL kingsmen@bellsouth.net
WEBSITE www.kingsmencoachlines.com

GENERAL INFORMATION



Purchasing Department
P. O. Box 1627
Normal, Alabama 35762
(256) 372-5227 Office
(256) 372-5223 Fax

SHIPPING/MAILING FOR BIDS

SPECIAL DIRECTIONS:

(1) SHIPPING ADDRESS VIA FedEx, DHL or AIRBORNE EXPRESS

Alabama A&M University
Purchasing Department
4900 Meridian Street
Room 305 L.R. Patton Hall
Huntsville, AL 35810

(2) United States Postal Service

Purchasing Department
Alabama A&M University
~~P.O. Box 1627~~
Rm. 305
Normal, AL 35762

(if mailed, the packet must reach our office by 2 p.m. deadline to be considered)



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SPECIAL DIRECTIONS:

Vendors may utilize their quotation forms to itemize the bid quote. However, Alabama A&M University Bid Forms must be completed and returned as part of the bid quote.

The bidder may quote on any or all items since the university reserves the right to make the award by line item or by total package.

Reference to manufactures, suppliers, catalog numbers, etc. is intended to set quality standards and does not exclude bids from others as long as quality standards are met. Offers of equal items shall state the brand and number or level of quality.

Alabama A&M University will be sole judge of equal items bid.

All bidders must send descriptive literature and/or manufacturer's specifications, along with any supplemental addition specifications necessary to compare the item bid on with the requirements set forth in the bid form.

All bids must be submitted with the bid number and opening date indicated on the envelope. All bids must be submitted within a sealed package. Otherwise, alternative bids will not be considered.



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Bid Bonds

It is required for any contract exceeding \$10,000, that the bidder submits with his or her bid a Bid Bond payable to Alabama A&M University in the amount not less than five percent (5%) of the base bid or not to exceed \$10,000. Bids Bonds must be submitted in a form of a cashier's check, certified check, postal money order, irrevocable letter of credit or U.S. treasury notes in lieu of a bid bond. No personal checks or company checks will be accepted. It is at the buyer's discretion on whether or not to require Bid Bonds for all other bids. **If Bid Bonds are not included the bidder's results will not be considered.**

Bid Bonds remains in effect until the service or job is completed.



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Effective immediately, this notice shall be included in all Invitation to Bid (ITBs) to provide labor, supplies, or services for Alabama A&M University pursuant to contracts which are required by law to be publically bid.

NOTICE (ITB)

The Beason-Hammon Alabama Taxpayer and Citizen Protection Act, Act NO. 2011-535, *Code of Alabama (1975) § 31-13-1 through 31-13-30* as amended (also known as and hereinafter referred to as "the Alabama Immigration Act") is applicable to contracts with Alabama A&M University (the "University"). As a condition for the award of a contract which is required by law to be publically bid, and as a term and condition of the contract with the University, any business entity or employer that employs one or more employees shall not knowingly employ, hire for employment, or the documentation established that the business entity or employer is enrolled in the E-Verify program. A response to this ITB which does not include the required proof of E-Verify enrollment will be considered non-conforming and non-responsive. The University at its sole discretion may allow a reasonable period, not to exceed ten (10) business days, for non-conforming bids to be amended to comply with the Alabama Immigration Act. However, the University has no duty to alert any bidder that their response is non-conforming in any aspect.

In addition to providing proof of E-Verify enrollment, contractor must agree to the following clause which must be included any contract which is awarded through the bud process.

"By signing this contract, the contracting parties affirm, for the duration of this agreement, that they will not violate federal immigration law or knowingly employ, hire for employment, or continue to employ an unauthorized alien within the State of Alabama. Furthermore, a contracting party found to be in violation of this provision shall be deemed in breach of the Agreement and shall be responsible for all damages resulting therefrom."

The contracting business entity or employer shall assure and require that every subcontractor performing under the contract shall also comply with this Act, and the contracting business entity or employer shall maintain records that are available upon by the university, state authorities, or law enforcement to verify its compliance and the compliance of all subcontractors with the result in breach of contract, termination of the contract or subcontract, and possibly suspension or revocation of business licenses and permits.



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Certification Pursuant To Act No. 2006-557

The following statement is applicable to all Requests for Formal Bid and Contracts for Professional Services that are required on all taxable sales and leases into Alabama:

Alabama Law (Section 41-4-116, Code of Alabama 1975) provides that every bid submitted and contract executed shall contain a certification that the vendor, contractor, and all of its affiliates that make sales for delivery into Alabama or leases for use in Alabama are registered, collecting, and remitting Alabama state and local sales, use, and/or lease tax on all taxable sales and leases into Alabama.

By submitting this bid, the bidder is hereby certifying that they are in full compliance with Act No. 2006-557, they are not barred from bidding or entering into a contract pursuant to 41-4-116, and acknowledges that the awarding authority may declare the contract void if the certification is false.

Section 41-4-116

Taxation on sales and leases of tangible personal property to state agency.

- (a) For the purpose of this division, the following terms shall have the respective meanings ascribed by this section:
- (1) AFFILIATE. A related party as defined in subsection (b) of Section 40-23-190 as that provision exists on January 1, 2004.
- (2) STATE DEPARTMENT or AGENCY. Every state office, department, division, bureau, board, or commission of the State of Alabama.
- (b) A state department or agency may not contract for the purchase or lease of tangible personal property from a vendor, contractor, or an affiliate of a vendor or contractor, unless that vendor, contractor, and all of its affiliates that make sales for delivery into Alabama or leases for use in Alabama are properly registered, collecting, and remitting Alabama, state, and local sales, use, and lease tax, as provided for by Chapter 12, Article 4, and Chapter 23, Articles 1 and 2 of Title 40 or by any local act or ordinance.
- (c) Each vendor, contractor, or affiliate of a vendor or contractor that is offered a contract to do business with a state department or state agency shall be required to certify that the vendor or affiliate is appropriately registered to collect and remit sales, use, and lease tax as required by this section and submit to that state department or agency certification required by the Alabama Department of Revenue.
- (d) Every bid submitted and contract executed by the state shall contain a certification by the bidder or contractor that the bidder or contractor is not barred from bidding for or entering into a contract under this section and that the bidder or contractor acknowledges that the contracting state agency may declare the contract void if the certification completed is false.
- (e) Each vendor or contractor that sells or leases tangible personal property to a state department or agency, and each affiliate of that vendor or contractor that makes sales for delivery into Alabama, shall be required to collect and remit the Alabama sales, use, or lease tax on all its sales and leases into the state.
(Act 2006-557, p. 1281, §1.)

Bus provided for trips must meet the following requirements:
Alabama A&M University Marching Band

- * Buses that are sent to us for our use must be no older than the 2011 models in excellent running condition, (your latest models preferred). In the event that the bus/s does not meet our requirements, we reserve the right to a reduction in price or the right to cancel services for the remainder of the bid term.
- * 55/56 passenger coach
- * The bus exterior physical appearance (color, graphics etc.) should be identical for all total requested buses
- * Roomy Reclining Seats with Foot Rest
- * Individual Reading Lights and above head air vent controls
- * Working Audio/DVD Video Equipment
- * Spacious clean restroom
- * Overhead racks for carry-on bags
- * Climate-controlled air conditioning and heating systems
- * Large, weather-proof luggage compartments below bus
- * Wi-Fi or Satellite Capability
- * Bus driver must be knowledgeable regarding site-directions per itinerary
- * Buses must be punctual and capable of arriving and departing on time per itinerary
- * Buses should be serviced and ready for travel prior to departure. Should a bus breakdown, another bus should be made available immediately. If this problem persists, we reserve the right to cancel services for the remainder of the bid term.
- * Kneeling Coaches to shorten the distance between the ground and the first step
- * Successful bidder must be a member of either the United Bus Owner's Association, or American Bus Association/United Motor Coaches of America.
- * The bidder must be licensed for interstate and intrastate passenger transportation
- * Each bus must be equipped with all safety devices and must meet all applicable state and federal requirements.
- * Each bus must have affixed a current DOT inspection sticker
- * The successful bidder will be required to provide a Certificate of Insurance to the University
- * The University reserves the right to cancel a trip at any time due to inclement weather or schedule changes.
- * Award will be made to the bidder who is determined by the University to best meet its needs and objectives.

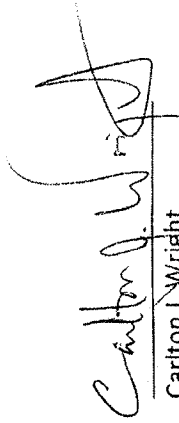
BID REQUEST

ALABAMA A&M UNIVERSITY
"MARCHING MAROON & WHITE" BAND

Fall 2016 – Travel Bid Request & Schedule

QTY	ITEM #	DESCRIPTION OF ITEM	DESTINATION	DEPARTURE DATE & TIME	RETURN DATE & TIME
5	1	55 Passenger Bus w/TV Monitors	From: Huntsville, AL To: Murfreesboro, TN	September 3, 2016 TBA	September 3, 2016 TBA
5	2	55 Passenger Bus w/TV Monitors	To: Pine Bluff, AR	October 15, 2016 1:00 a.m.	October 16, 2016 8:00 p.m.
5	3	55 Passenger Bus w/TV Monitors	To: Birmingham, AL	October 29, 2016 5:00 a.m.	October 30, 2016 1:00 p.m.
5	4	55 Passenger Bus w/TV Monitors	To: Jackson, MS	November 12, 2016 3:00 a.m.	November 12, 2016 12:00 Midnight
5	5	55 Passenger Bus w/TV Monitors	To: Auburn, AL	November 19, 2016 6:00 a.m.	November 19, 2016 11:30 p.m.

*** Request for your latest model Buses (nothing older than a 2011 model) ***
Time and Dates are subject to change.....


 Carlton J. Wright
 Director of Bands
 Alabama A&M University

Date: 5/17/16

Bid Number:

Page 1 of 2

#	62935.00
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Grand Total:

FOB Point:	Terms: 30 DAYS	Warranty:
Estimated Delivery:	Your Reference No.:	Quotation Effective Until:

If we receive your order to furnish items listed hereon at the prices and under the conditions indicated. Pricing on this page reflects the pricing for the associated specifications.

Signed KINGSMEN COACH LINES, LLC 7/5/16
Vendor Name Date

Vendor Name

Date _____

By



ALABAMA AGRICULTURAL AND MECHANICAL UNIVERSITY
PURCHASING DEPARTMENT
POST OFFICE BOX 1627
305 PATTON HALL
NORMAL, ALABAMA 35762
TELEPHONE: (256) 372-5227

ALL BIDS WILL BE PUBLICLY OPENED ON THE OPENING DATE DESIGNATED AT ALABAMA AGRICULTURAL AND MECHANICAL UNIVERSITY, PURCHASING DEPARTMENT, PATTON HALL, NORMAL, ALABAMA 35762. BIDS RECEIVED AFTER THE SPECIFIED TIME ON THE OPENING DATE WILL NOT BE CONSIDERED.

DATE BID NUMBER

June 8, 2016

2k16-06B

RESPONSE DUE BY

7/7/16
2:00 P.M.

REQUEST FOR FORMAL BID

CONTACT Jeffrey Robinson

PHONE 256-372-5227

VENDOR NO.

V KINGSMEN COACH LINE
E
N 1570 CEDAR GROVE ROAD
D
O CONLEY GA. 30288
R

ALL BIDS MUST BE SIGNED, SEALED, AND RETURNED IN AN ENVELOPE WITH THE BID NUMBER AND OPENING DATE NOTED ON FRONT. FORWARD ALL BIDS TO THE ADDRESS INDICATED ABOVE. FAILURE TO COMPLY WILL RESULT IN A "NO BID" RESPONSE IN ACCORDANCE WITH ALABAMA COMPETITIVE BID LAW 41-16-24 sub-part b.

THE ABOVE BID NUMBER MUST APPEAR ON ALL BIDS AND RELATED CORRESPONDENCE

NO.	QUANTITY	UNIT	DESCRIPTION	UNIT PRICE	EXTENSION
1	5		55 PASSENGER BUS W/TV MONITORS, WIFI AND DIRECT TV. Roundtrip Transport to Murfreesboro, TN.	\$1,507.50	\$7,535.50

SHOULD A PURCHASE ORDER BE ISSUED, THE FOREGOING AND THE TERMS AND CONDITIONS ON THE ATTACHED SHEET SHALL BE APPLICABLE AND BINDING UPON THE VENDOR.

I ACKNOWLEDGE THAT I HAVE SIGNATURE AUTHORITY TO SIGN ON BEHALF OF THE COMPANY AND HEREBY AGREE TO ALL GENERAL CONDITIONS OF THIS BID REQUEST.

TOTAL

\$ 7,535.50

SIGNATURE

COMPANY REPRESENTATIVE

DATE

7/5/16

An affirmative action/equal opportunity institution



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NO.	QUANTITY	UNIT	DESCRIPTION	UNIT PRICE	EXTENSION
1	5		55 PASSENGER BUS W/TV MONITORS, WIFI AND DIRECT TV. Roundtrip Transport to PINE BLUFF, AR.	\$3,442.50	\$17,212.50

SHOULD A PURCHASE ORDER BE ISSUED, THE FOREGOING AND THE TERMS AND CONDITIONS ON THE ATTACHED SHEET SHALL BE APPLICABLE AND BINDING UPON THE VENDOR.

I ACKNOWLEDGE THAT I HAVE SIGNATURE AUTHORITY TO SIGN ON BEHALF OF THE COMPANY AND HEREBY AGREE TO ALL GENERAL CONDITIONS OF THIS BID REQUEST.

TOTAL \$17,212.50

SIGNATURE

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DATE

7/5/16

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NO.	QUANTITY	UNIT	DESCRIPTION	UNIT PRICE	EXTENSION
1	5		55 PASSENGER BUS W/TV MONITORS, WIFI AND DIRECT TV. Roundtrip Transport to Birmingham, AL	\$1,732.50	\$8,662.50

SHOULD A PURCHASE ORDER BE ISSUED, THE FOREGOING AND THE TERMS AND CONDITIONS ON THE ATTACHED SHEET SHALL BE APPLICABLE AND BINDING UPON THE VENDOR.

I ACKNOWLEDGE THAT I HAVE SIGNATURE AUTHORITY TO SIGN ON BEHALF OF THE COMPANY AND HEREBY AGREE TO ALL GENERAL CONDITIONS OF THIS BID REQUEST.

TOTAL

\$ 8,662.50

SIGNATURE

COMPANY REPRESENTATIVE

DATE

7/5/16

An affirmative action/equal opportunity institution



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THE ABOVE BID NUMBER MUST APPEAR ON ALL BIDS AND RELATED CORRESPONDENCE

NO.	QUANTITY	UNIT	DESCRIPTION	UNIT PRICE	EXTENSION
1	5		55 PASSENGER BUS W/TV MONITORS, WIFI AND DIRECT TV. Roundtrip Transport to JACKSON, MS.	\$3,272.40	\$16,362.00
TOTAL				\$16,362.00	

SHOULD A PURCHASE ORDER BE ISSUED, THE FOREGOING AND THE TERMS AND CONDITIONS ON THE ATTACHED SHEET SHALL BE APPLICABLE AND BINDING UPON THE VENDOR.
I ACKNOWLEDGE THAT I HAVE SIGNATURE AUTHORITY TO SIGN ON BEHALF OF THE COMPANY AND HEREBY AGREE TO ALL GENERAL CONDITIONS OF THIS BID REQUEST.

SIGNATURE _____
COMPANY REPRESENTATIVE

DATE _____
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THE ABOVE BID NUMBER MUST APPEAR ON ALL BIDS AND RELATED CORRESPONDENCE

NO.	QUANTITY	UNIT	DESCRIPTION	UNIT PRICE	EXTENSION
1	5		55 PASSENGER BUS W/TV MONITORS, WIFI AND DIRECT TV. Roundtrip Transport to Auburn, AL	\$2,632.50	\$13,162.50

SHOULD A PURCHASE ORDER BE ISSUED, THE FOREGOING AND THE TERMS AND CONDITIONS ON THE ATTACHED SHEET SHALL BE APPLICABLE AND BINDING UPON THE VENDOR.
I ACKNOWLEDGE THAT I HAVE SIGNATURE AUTHORITY TO SIGN ON BEHALF OF THE COMPANY AND HEREBY AGREE TO ALL GENERAL CONDITIONS OF THIS BID REQUEST.

TOTAL \$13,162.50

SIGNATURE

COMPANY REPRESENTATIVE

DATE

7/5/16
An affirmative action/equal opportunity institution

Note: In order for an alternate bid to be considered, bidders must supply current catalogs or brochures, including pictorials and specifications.

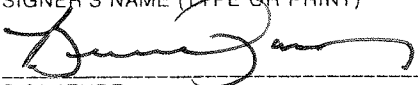
Please indicate your company classification by circling the appropriate initial: Small Business **(SB)**, a Small Disadvantaged Business (SD), a Black Small Disadvantaged Business (BD), a Woman-Owned Small Business (WB), a Woman-Owned Small Disadvantaged Business (WD), a Black Woman-Owned Small Disadvantaged Business (BW), a Large Business (LB), an Individual (IN), Educational (ED), Non-Profit (NP), a Labor Surplus Area Concern (LS), Disabled Veteran-Owned Small Business (DV), Veteran-Owned Small Business (VS), Historically Underutilized Business Zone (UZ), or a Governmental Agency (GV).

F.O.B. Point	TERMS 30 Days	WARRANTY
AAMU DESTINATION ESTIMATED DELIVERY	YOUR REFERENCE NO.* 00152	QUOTATION EFFECTIVE UNTIL DEC 31, 2016

*Your company reference number, if applicable with this bid quotation.

Certification Pursuant To Act No. 2006-557

Alabama Law (Section 41-4-116, Code of Alabama 1975) provides that every bid submitted and contract executed shall contain a certification that the vendor, contractor, and all of its affiliates that make sales for delivery into Alabama or leases for use in Alabama are registered, collecting, and remitting Alabama state and local sales, use, and/or lease tax on all taxable sales and leases into Alabama. By submitting this bid, the bidder is hereby certifying that they are in full compliance with Act No. 2006-557, they are not barred from bidding or entering into a contract pursuant to 41-4-116, and acknowledges that the awarding authority may declare the contract void if the certification is false.

KINGSMEN COACH LINES, LLC COMPANY NAME (TYPE OR PRINT)	404-362-9339 TELEPHONE NUMBER
BERNARD BARNES SIGNER'S NAME (TYPE OR PRINT)	404-362-0254 FAX NUMBER
 SIGNATURE	JULY 5, 2014 DATE

Alabama Agricultural and Mechanical University prohibits the installation of asbestos on its campus. Suppliers and contractors will not supply any equipment, material, or supplies, which contain asbestos without prior written approval.

Failure to designate Bid Number and Opening Date on the outside of your sealed envelope containing your bid and more than one bid submitted in this envelope will result in a "No Bid" response in accordance with Alabama Competitive Bid Law 41-16-24 subpart b.

Alabama Agricultural and Mechanical University will not accept faxed bids.

Any product that fails to meet the specifications, performance requirements or compatibility requirements will be rejected and returned to the vendor at no cost to the University.

The University reserves the right to award this contract, in whole, in part, or to reject any and all quotations.

Alabama A & M University is an instrumentality of the State and is federal, state and local tax exempt.

SPECIAL NOTE:

Manufacturer's published product data must be included with your bid response for any alternate offerings. Any exception taken to any portion of this Request for Price Quotation must be stated on the bid response sheets or Alabama A&M University will assume compliance with all requirements as stated. The successful bidder will be responsible and accountable for providing those items as specified in its bid response.

EQUIPMENT



Purchasing Department
P. O. Box 1627
Normal, Alabama 35762
(256) 372-5227 Office
(256) 372-5223 Fax

Bid Number: 02k15-13B

Bus Passenger Capacity:

56

Bus Passenger Quoted:

SEE ATTACHED

Model: _____
Year

Brand Name

FOB Point:	TERMS:	WARRANTY:
Estimated Delivery:	Your Reference No.:	Quotation Effective Until:

If we receive your order to furnish items listed hereon at the prices and under the conditions indicated.

Signed: _____
VENDOR NAME DATE

By: _____

Sherryl Forman
256-372-5974 fax
email sherryl.forman@aaamu.edu



DATE: 7/5/2016

Qty.	Fleet #	Vehicle Year	Vehicle Make	Vehicle Model	Vehicle Color	Vehicle VIN	License Plate #	Seat Capacity
1	111	2010	Vanhool	C-2045	Burgundy	YE2CC16B072046757	IC19MJ	57
2	112	2010	MCI	J4500	Burgundy	2M93JMPA37W063785	IC16MJ	56
3	117	2010	MCI	J4500	Burgundy	2M9EM0PA57W063786	IC14MJ	56
4	118	2010	MCI	J4500	Burgundy	2M93JMPA77W064230	IC13MJ	56
5	120	2010	MCI	J4500	Burgundy	2M93JMPA97W064231	IC15MJ	56
6	121	2011	Prevost	H345	Burgundy	2PCH33491BC711867	IC17ML	56
7	122	2015	MCI	J4500	Burgundy	2MG3JM8A2FW067204	IC73ML	56
8	123	2013	MCI	J4500	Burgundy	ZMG3JM8A0DW066310	IC18MJ	56
9	124	2014	Vanhool	TX45	Burgundy	YE2CC11BXE2041141	IC11MJ	56
10	125	2015	Vanhool	TX45	Burgundy	YEZYC11B7F2041308	IC47NP	56
11	126	2016	Prevost	H345	Burgundy	2PCH33499GC7133244	IC16MJ	56
12								
13								
14								
15								
16								
17								
18								
19								
20								

PART 1

FEDERAL MOTOR CARRIER

SAFETY FORM

Federal Motor Carrier Safety Form

As a requirement of the University, provide all the following information:

1. USDOT number: 252315
2. Current USDOT safety rating: Satisfactory (4/29/15)

ATTACH TO THIS FORM

3. Date the company's last compliance review: 5/5/16

ATTACH TO THIS FORM

4. Company must be authorized to transport passengers for hire. SEE ATTACHED
5. Company must have current insurance in force. SEE ATTACHED
6. Company must have record of regulatory violations and roadside out-of-service violations, with a comparison to national averages SEE ATTACHED
- _____

ATTACH TO THIS FORM

7. Company must provide highway crash history N/A
- _____

ATTACH TO THIS FORM

8. Driver must have a current commercial driver's license (CDL) with a passenger endorsement SEE ATTACHED

COMPANIES MUST PROVIDE A COPY OF THIS DOCUMENT AT THE TIME OF PICK UP

9. Driver must have a valid medical certificate YES

COMPANIES MUST PROVIDE A COPY OF THIS DOCUMENT AT EACH TIME OF PICK UP

APRIL 29 2015

US DOT

COMPLIANCE RATING

UNITED STATES DEPARTMENT OF TRANSPORTATION

US DOT #
252315Legal: KINGSMEN COACH LINES LLC
Operating (DBA):

MC/MX #: 570511

Federal Tax ID: 20-5033628 (EIN)

Review Type: Compliance Review (CR)

Scope: Principal Office

Location of Review/Audit: Company facility in the U. S.

Territory: I

Operation Types Interstate Intrastate

Carrier: Non-HM Non-HM

Shipper: N/A N/A

Cargo Tank: N/A

Business: Other

Gross Revenue: \$2,452,199.00

for year ending: 12/31/2014

Company Physical Address:

1570 CEDAR GROVE ROAD
CONLEY, GA 30288-1203

Contact Name: Bernard Barnes

Phone numbers: (1) 404-362-9339

(2) 404-375-0815

Fax 404-362-0254

E-Mail Address: KINGSMEN@BELLSOUTH.NET

Company Mailing Address:

P O BOX 661
CONLEY, GA 30288

Carrier Classification

Authorized for Hire

Cargo Classification

Passengers

Equipment

Owned Term Leased Trip Leased

Motor Coach 11 0 0

Owned Term Leased Trip Leased

Power units used in the U.S.: 11

Percentage of time used in the U.S.: 100

Does carrier transport placardable quantities of HM? No

Is an HM Permit required? N/A

Driver Information

Inter Intra

< 100 Miles: 0 0

>= 100 Miles: 20 0

Average trip leased drivers/month: 0

Total Drivers: 20

CDL Drivers: 20



KINGSMEN COACH LINES LLC

U.S. DOT #: 252315

Review Date:

04/29/2015

Part A

Questions about this report or the Federal Motor Carrier Safety or Hazardous Materials regulations may be addressed to the Federal Motor Carrier Safety Administration at:

Two Crown Center, 1745 Phoenix Boulevard, Suite 380
Atlanta, GA 30349
Phone: (678)284-5130 Fax: (678)284-5146

This report will be used to assess your safety compliance.

Person(s) Interviewed

Name: Mr. Walter Hubbard

Title: President

Name: Mr. Bernard E. Barnes

Title: Operations Manager/Driver





KINGSMEN COACH LINES LLC
U.S. DOT #: 252315

Review Date:
04/29/2015

Part B Violations

1 FEDERAL	Primary: 382.105	Discovered 2	Checked 26	Drivers/Vehicles In Violation 1	Checked 20
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Description

Failing to ensure that alcohol or controlled substances testing complies with the procedures set forth in 49 CFR Part 40.

Example

Driver Rolando E. Mullings, Trip Date 04/16/2014, on 01/06/2014 had a drug and alcohol tests that were marked Return-to-Duty, should have been pre-employment.

2 FEDERAL	Primary: 392.2	Discovered 1	Checked 3	Drivers/Vehicles In Violation 1	Checked 3
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Description

Operating a motor vehicle not in accordance with the laws, ordinances, and regulations of the jurisdiction in which it is being operated.

Example

Driver Rolando Mullings, Trip Date 04/16/2014, Lane Restriction.

3 FEDERAL	Primary: 395.5(b)(2)	Discovered 3	Checked 210	Drivers/Vehicles In Violation 1	Checked 7
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Description

Requiring or permitting a passenger-carrying commercial motor vehicle driver to drive after having been on duty 70 hours in 8 consecutive days.

Example

Driver Lawrence P. Hamilton, Trip Dates 03/17/2015 through 03/24/2015, drove 3 hours after having been on duty for more than 70 hours in 8 consecutive days.

4 FEDERAL	Primary: 395.8(k)(1)	Discovered 3	Checked 210	Drivers/Vehicles In Violation 2	Checked 7
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Description

Failing to preserve driver's record of duty status for 6 months.

Example

Driver Lawrence P. Hamilton, Trip Date 03/02/2015, log sheet missing.

Safety Fitness Rating Information:

Total Miles Operated 115,621
Recordable Accidents 0
Recordable Accidents/Million Miles 0.00

OOS Vehicle (CR): 0
Number of Vehicle Inspected (CR): 4
OOS Vehicle (MCMIS): 0
Number of Vehicles Inspected (MCMIS): 1

Your proposed safety rating is :

SATISFACTORY

Rating Factors		Acute	Critical
Factor 1:	S	0	0
Factor 2:	S	0	0
Factor 3:	S	0	0
Factor 4:	S	0	0
Factor 5:	N	0	0
Factor 6:	S	-	-

Corrective actions must be taken for any violations (deficiencies) identified on Part B of this report.



**Part B Requirements and/or Recommendations**

1. If you have any questions concerning this report please address them to the address and telephone numbers at the front of this report.
2. Have a program of driver's training with training meetings at least every quarter. Maintain records of this training, training covered, training materials used, a list drivers trained, and instructors.
3. Ensure that you have an effective drug and alcohol testing program that meets the testing requirements of FMCSR Part 40 and Part 382.

4. UNSAFE DRIVING BASIC PROCESS BREAKDOWN: Monitoring and Tracking**DESCRIPTION OF PROCESS BREAKDOWN****BASIC SPECIFIC RECOMMENDED REMEDIES**

Implement Safety Improvement Practices: The following are recommended practices related to Monitoring and Tracking Processes.

- Ensure that the safety director/dispatchers ascertain that all routes can be completed within speed limits.
 - Maintain roadside inspection reports, moving violation records, and "How am I driving?" complaints to help evaluate the performance of all staff (drivers and managers) involved in safe driving and the effectiveness of the policies and procedures.
 - Review and retain each driver's Motor Vehicle Record (MVR) at least annually to ensure compliance with company policies, Federal regulations, and State and local laws and ordinances related to safe driving. If a driver seems to have license-related problems, the MVR should be reviewed more often. Random MVR checks in addition to annual checks are also effective. File the MVR in each driver's driver qualification file after review.
 - Ensure that dispatchers and/or the safety manager monitor drivers' speed for violations with use of an electronic or manual movement record that is, that they track driver movements via driver reports, global positioning systems (GPS), and travel receipts.
 - Evaluate personnel who are monitoring drivers' safety performance by making sure that they are using inspections and other data; applying performance standards fairly, consistently, and equitably; and documenting evaluations.
 - Place a "How am I driving?" sticker on every truck to get feedback from the public on drivers exhibiting unsafe behaviors on the road. Assess feedback for safety implications.
 - Regularly evaluate the company's unsafe-driving-related inspection results via the Federal Motor Carrier Safety Administration's (FMCSA) website at <http://ai.fmcsa.dot.gov/SMS>. Assess violations for process breakdowns and how to remedy them. Use data to help implement an effective process beyond self-reporting to monitor, document, and evaluate compliance with unsafe-driving regulations and company policies.
 - Implement a system for keeping accurate records of employee driving-safety training needs and completed training, via software, a checklist in the driver's file, and/or another appropriate method.
 - When monitoring and tracking any unsafe-driving-related issues, always assess whether an issue is individual or represents a systemic breakdown in one of the Safety Management Processes (Policies and Procedures, Roles and Responsibilities, etc.).
5. Do not schedule or require drivers to make trips requiring them to exceed posted speed limits in order to complete the run within the hours of service limits.
 6. Require all drivers to prepare complete and accurate records of duty status for each day, and to submit them within 13 days. Maintain all duty status records on file, with all supporting documents, for at least 6 months.
 7. Review with your drivers periodically the procedures for doing pre-trip and post-trip inspections. Ensure that safety defects reported by drivers on their Vehicle Inspection Reports (VIR) are repaired before the vehicle is re-dispatched. Require drivers to prepare Vehicle Inspection Reports on a daily basis. Keep them on file for 90 days.



**Part B Requirements and/or Recommendations**

8. This review will result in a Safety Rating.

9. Provide pre-trip safety information to motorcoach passengers. For information about the Basic Plan for Motorcoach Passenger Safety Awareness that was published by the Federal Motor Carrier Safety Administration, go to the Agency's Web site at:
<http://www.fmcsa.dot.gov/about/outreach/bus/bus-safety-awareness-plan.htm>

10. HOS COMPLIANCE BASIC PROCESS BREAKDOWN: Monitoring and Tracking

DESCRIPTION OF PROCESS BREAKDOWN

BASIC SPECIFIC RECOMMENDED REMEDIES

Implement Safety Improvement Practices: The following are recommended practices related to Monitoring and Tracking Processes.

- Implement an effective process for monitoring, tracking, and evaluating all drivers' compliance with Hours-of-Service (HOS) regulations and company policies.
- Promptly review all Records of Duty Status (RODS) for Hours-of-Service (HOS) violations and falsification. Look for discrepancies by comparing driver logs with their "check-in" calls and other supporting documents.
- Document all findings of fatigue-related noncompliance with regulations and/or company policies.
- Systematically check to see if drivers and dispatchers are regularly communicating about Hours-of-Service (HOS) availability and driver-fatigue level.
- Maintain roadside inspection, Records of Duty Status (RODS), supporting documents, dispatch schedules, and communication records to help evaluate the performance of all staff (drivers, dispatchers, and managers) involved in Hours of Service (HOS) and the effectiveness of compliance with HOS policies, procedures, and regulations.
- Regularly evaluate the company's fatigue-related inspection results via the Federal Motor Carrier Safety Administration's (FMCSA) website at <http://ai.fmcsa.dot.gov/SMS>. Assess violations for process breakdowns and how to remedy them.
- Implement a system for keeping accurate records of employees' Hours-of-Service (HOS) training needs and completed training, via software, a checklist in the driver's file, and/or another appropriate method.
- Evaluate personnel (log clerks, payroll, dispatchers, and third-party safety consultants) who are monitoring drivers' Records of Duty Status (RODS) for accuracy; for whether they are applying performance standards fairly, consistently, and equitably; and for whether they are documenting evaluations.
- Consider using Electronic On-board Recorders (EOBRs) to monitor and track Hours-of-Service (HOS) violations.
- When monitoring and tracking any fatigue-related issues, always assess whether an issue is individual or represents a systemic breakdown in the Safety Management Processes (Policies and Procedures, Roles and Responsibilities, etc.).

Passenger Carrier Only:

- Monitor and track driver-fatigue-related passenger complaints and assess safety implications.
- Ensure that management ascertains that available hours account for rest periods, separate operations within-company, intermittent and relief drivers, and changes to itinerary that require "extended day." Check in with drivers at pre-designated intervals.

11. For all Investigations:

- **Understand Why Compliance Saves Time and Money:** Compliance with FMCSRs will not only save lives, but also saves your business time and money. Tracking how much your business spends on non-compliance activities can help you understand the many benefits of compliance to your business and why safety is good business.
- **Document and Follow Through on Action Plans:** Document and follow through on action plans to ensure the actions you are taking are creating improvement in safety management and compliance.



**Part B Requirements and/or Recommendations**

- **NOTICE:** A pattern and/or repeated violations of the same or related acute or critical regulations (violations of the same Part in Title 49, Code of Federal Regulations) will cause the maximum penalties allowed by law to be assessed under Section 222 of the Motor Carrier Safety Improvement Act of 1999 (MCSIA). A pattern of violations means two or more violations of acute and/or critical regulations in three or more Parts of Title 49, Code of Federal Regulations discovered during any eligible investigation. Repeated violations means violation(s) of an acute regulation of the same Part of Title 49, Code of Federal Regulations discovered in an investigation after one or more closed enforcement actions within a six year period and/or violation(s) of a critical regulation in the same Part of Title 49, Code of Federal Regulations discovered in an investigation after two or more closed enforcement actions within a six year period.

- **NOTICE:** 49 CFR Part 391.23 requires prospective employers to, at a minimum, investigate a driver's employment information, crash record, and alcohol and controlled substances history from all employers the driver worked for within the previous 3 years.

The Pre-Employment Screening Program (PSP) is a screening tool that assists motor carriers in investigating crash history and roadside safety performance of prospective drivers. The PSP allows motor carriers to purchase 5 years of crash data and 3 years of roadside inspection data from the Federal Motor Carrier Safety Administration's (FMCSA) Motor Carrier Management Information System (MCMIS). Records are available 24 hours a day via Web request. Motor carriers should visit the following website for more information:
<http://www.psp.fmcsa.dot.gov/Pages/default.aspx>

- All motor carriers and truck drivers are needed to fight against terrorism and hijacking. You could be a target. Protect yourself, your trucks, your cargo, and your facilities. Discuss with your employees/drivers the "Security Measures for Truck Drivers and Companies" which were provided and reviewed with motor carrier official. Motor carriers should visit the following website for more information:
<http://www.fmcsa.dot.gov/documents/Hijacking-Brochure.pdf>

Information on your compliance status, roadside inspections, regulatory changes, accident countermeasures and hazardous material incident prevention manual is available on the Internet at the Federal Motor Carrier Safety Administration's web site at <http://www.fmcsa.dot.gov/> and <http://www.safer.fmcsa.dot.gov/>.



**Part B Requirements and/or Recommendations**

1. If you have any questions concerning this report please address them to the address and telephone numbers at the front of this report.
2. Have a program of driver's training with training meetings at least every quarter. Maintain records of this training, training covered, training materials used, a list drivers trained, and instructors.
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Implement Safety Improvement Practices: The following are recommended practices related to Monitoring and Tracking Processes.

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Ensure that dispatchers and/or the safety manager monitor drivers' speed for violations with use of an electronic or manual movement record that is, that they track driver movements via driver reports, global positioning systems (GPS), and travel receipts.

- Evaluate personnel who are monitoring drivers' safety performance by making sure that they are using inspections and other data; applying performance standards fairly, consistently, and equitably; and documenting evaluations.
- Place a "How am I driving?" sticker on every truck to get feedback from the public on drivers exhibiting unsafe behaviors on the road. Assess feedback for safety implications.
- Regularly evaluate the company's unsafe-driving-related inspection results via the Federal Motor Carrier Safety Administration's (FMCSA) website at <http://ai.fmcsa.dot.gov/SMS>. Assess violations for process breakdowns and how to remedy them. Use data to help implement an effective process beyond self-reporting to monitor, document, and evaluate compliance with unsafe-driving regulations and company policies.
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- When monitoring and tracking any unsafe-driving-related issues, always assess whether an issue is individual or represents a systemic breakdown in one of the Safety Management Processes (Policies and Procedures, Roles and Responsibilities, etc.).

5. Do not schedule or require drivers to make trips requiring them to exceed posted speed limits in order to complete the run within the hours of service limits.
6. Require all drivers to prepare complete and accurate records of duty status for each day, and to submit them within 13 days. Maintain all duty status records on file, with all supporting documents, for at least 6 months.
7. Review with your drivers periodically the procedures for doing pre-trip and post-trip inspections. Ensure that safety defects reported by drivers on their Vehicle Inspection Reports (VIR) are repaired before the vehicle is re-dispatched. Require drivers to prepare Vehicle Inspection Reports on a daily basis. Keep them on file for 90 days.



**Part B Requirements and/or Recommendations**

8. This review will result in a Safety Rating.
9. Provide pre-trip safety information to motorcoach passengers. For information about the Basic Plan for Motorcoach Passenger Safety Awareness that was published by the Federal Motor Carrier Safety Administration, go to the Agency's Web site at:
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- Implement an effective process for monitoring, tracking, and evaluating all drivers' compliance with Hours-of-Service (HOS) regulations and company policies.
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- Consider using Electronic On-board Recorders (EOBRs) to monitor and track Hours-of-Service (HOS) violations.
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- All motor carriers and truck drivers are needed to fight against terrorism and hijacking. You could be a target. Protect yourself, your trucks, your cargo, and your facilities. Discuss with your employees/drivers the "Security Measures for Truck Drivers and Companies" which were provided and reviewed with motor carrier official. Motor carriers should visit the following website for more information:
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US DOT #
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Location of Review/Audit: Company facility in the U. S.

Territory: I

Operation Types Interstate Intrastate

Carrier: Non-HM Non-HM
Shipper: N/A N/A
Cargo Tank: N/A

Business: Other

Gross Revenue: \$2,452,199.00

for year ending: 12/31/2014

Company Physical Address:

1570 CEDAR GROVE ROAD
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Contact Name: Bernard Barnes

Phone numbers: (1) 404-362-9339

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Fax 404-362-0254

E-Mail Address: KINGSMEN@BELLSOUTH.NET

Company Mailing Address:

P O BOX 661
CONLEY, GA 30288

Carrier Classification

Authorized for Hire

Cargo Classification

Passengers

Equipment

Owned Term Leased Trip Leased

Motor Coach 11 0 0

Owned Term Leased Trip Leased

Power units used in the U.S.: 11

Percentage of time used in the U.S.: 100

Does carrier transport placardable quantities of HM? No

Is an HM Permit required? N/A

Driver Information

Inter Intra

< 100 Miles: 0 0

>= 100 Miles: 20 0

Average trip leased drivers/month: 0

Total Drivers: 20

CDL Drivers: 20



KINGSMEN COACH LINES LLC

U.S. DOT #: 252315

Review Date:

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Two Crown Center, 1745 Phoenix Boulevard, Suite 380
Atlanta, GA 30349
Phone: (678)284-5130 Fax:(678)284-5146

This report will be used to assess your safety compliance.

Person(s) Interviewed

Name: Mr. Walter Hubbard

Title: President

Name: Mr. Bernard E. Barnes

Title: Operations Manager/Driver





KINGSMEN COACH LINES LLC
U.S. DOT #: 252315

Review Date:
04/29/2015

Part B Violations

1 FEDERAL	Primary: 382.105	Discovered 2	Checked 26	Drivers/Vehicles In Violation 1	Checked 20
Description Failing to ensure that alcohol or controlled substances testing complies with the procedures set forth in 49 CFR Part 40. Example Driver Rolando E. Mullings, Trip Date 04/16/2014, on 01/06/2014 had a drug and alcohol tests that were marked Return-to-Duty, should have been pre-employment.					
2 FEDERAL	Primary: 392.2	Discovered 1	Checked 3	Drivers/Vehicles In Violation 1	Checked 3
Description Operating a motor vehicle not in accordance with the laws, ordinances, and regulations of the jurisdiction in which it is being operated. Example Driver Rolando Mullings, Trip Date 04/16/2014, Lane Restriction.					
3 FEDERAL	Primary: 395.5(b)(2)	Discovered 3	Checked 210	Drivers/Vehicles In Violation 1	Checked 7
Description Requiring or permitting a passenger-carrying commercial motor vehicle driver to drive after having been on duty 70 hours in 8 consecutive days. Example Driver Lawrence P. Hamilton, Trip Dates 03/17/2015 through 03/24/2015, drove 3 hours after having been on duty for more than 70 hours in 8 consecutive days.					
4 FEDERAL	Primary: 395.8(k)(1)	Discovered 3	Checked 210	Drivers/Vehicles In Violation 2	Checked 7
Description Failing to preserve driver's record of duty status for 6 months. Example Driver Lawrence P. Hamilton, Trip Date 03/02/2015, log sheet missing.					
Safety Fitness Rating Information: Total Miles Operated 115,621 Recordable Accidents 0 Recordable Accidents/Million Miles 0.00		OOS Vehicle (CR): 0 Number of Vehicle Inspected (CR): 4 OOS Vehicle (MCMIS): 0 Number of Vehicles Inspected (MCMIS): 1			
Your proposed safety rating is : SATISFACTORY		Rating Factors		Acute	Critical
		Factor 1:	S	0	0
		Factor 2:	S	0	0
		Factor 3:	S	0	0
		Factor 4:	S	0	0
		Factor 5:	N	0	0
		Factor 6:	S	-	-

Corrective actions must be taken for any violations (deficiencies) identified on Part B of this report.



MAY/05/2016

US DOD

COMPLIANCE RATING

**PASSENGER Motor Carrier Compliance Report**

Date: 5/5/2016	Inspection No.: 2152382
Carrier KINGSMEN COACH LINES LLC	Address 1570 Cedar Grove Road
DBA	
Trade	Conley GA 30288-
Contact Name Bernard Barns	Phone (404)362-9339
	Fax (404)362-0254
Inspectors: MICHAEL OBRIEN	
SUMMARY	
FACTOR	RATING
1 General	1
2 Driver	1
3 Operational	2
4 Vehicle	1
6 Accidents: Recordable Rate per Milli	1
7 DTMO/PASSENGER	1
Equipment Rating:	
INSPECTION RATING 1 SATISFACTORY	

This report identifies the status of this carrier's operations at the time of the inspection. These findings offer no assurance that the carrier's procedures and/or operations will reveal any future issues that do not fall under regulatory compliance or cause unsafe acts.

Executive Summary

CARRIER INFORMATION

Inspection No.: 2152382

Carrier Name KINGSMEN COACH LINES LLC

DBA

Trade Name

SCAC Code KCLL

Units Inspected:

DOT Number 252315

Current DTMO Inventory: 11

No critical or worse violations were discovered during this FTE. The operations manager, Mr. Bernard Barns, has taken action to correct numerous violations noted on the prior FTE conducted on December 18, 2014. KCL has not been involved in any recordable accidents, and no buses have been put out-of-service during roadside inspections.

Kingsmen Coach Lines LLC, referred to as "KCL" in the remainder of this report, is a for-hire passenger carrier conducting business since 1983. They currently own and operate 11 full sized motor coaches, and employ 14 drivers; two are multiply employed. KCL operates throughout the East Coast, with limited trips to points in the West. They also provide shuttle service for numerous convention and tour businesses in the Atlanta area. They have operated an average of 53 charters per month with an annual mileage of 597,789 miles. In addition, they have operated an average of 4.6 military charters in the last twelve months; the major military base being Ft. Benning in Columbus, GA. They lost the Atlanta Airport to Ft. Benning contract to Harmon Brothers Charter Services. This is the reason for the reduction in miles and drivers.

The company's owner and President is Mr. Walter Hubbard, who initiated operations in 1983. Mr. Bernard Barns is their full time Operations Manager; however, he still performs driver duties as needed. The owner's stepson, Mr. Xavier Landers, is their part time compliance supervisor. Mr. Landers is now the designated employee representative (DER) for their Alcohol and Controlled Substance testing program. He is a full time Fulton County police officer.

KCL operates out of a large fenced facility owned by Mr. Hubbard. Their offices are in a brick building on this property and it was found to be well organized, and presented a professional image of the carrier. On the same property a separate five bay, two story garage, is leased to Parker Truck Service, and is their 3rd party vender for almost all inspections and repairs. However, most oil changes are performed off site due to the special pressurized equipment needed to perform this task on the newer engines.

The most recent Federal Motor Carrier Safety Administration (FMCSA) compliance review on April 29, 2015 resulted in a satisfactory safety rating

Overall Results of Motor Carrier Compliance Audit Report

Citation

Violation and Comments

1) General

Inspection No.: 2152382

This factor evaluates whether or not the carrier has the necessary knowledge and understanding of Federal Motor Carrier Safety Regulations. It is also important to verify that the carrier instructs its employees and drivers so that they will understand their responsibilities in Safety and Compliance. Verification of the required documents to support the carrier's authority to operate as well as insuring proper financial responsibility is also a part of this factor. In order to meet the Safety Fitness Standard as described in Section 385.5, the motor carrier must demonstrate that adequate safety management controls are in place and are functioning effectively to ensure acceptable levels of compliance and performance.

These controls are defined in Section 385.3 as the systems, policies, programs, practices, and procedures used by the motor carrier to ensure compliance with all applicable regulations. Identification of a carrier's safety management controls and the evaluation of their effectiveness are a major component of this factor.

A review of documents provided by KCL confirms they possess the authority to operate in interstate commerce as a passenger carrier, and in the state of Georgia as a charter operation. The current MCS 90-B verifies they maintain the required level of insurance coverage with the same carrier since 2006. KCL belongs to the American Bus Association (ABA), and the Georgia Motorcoach Owners Association. Mr. Hubbard attends meetings, and seminars provided by those associations. The carrier's most recent FMCSA safety review on April 29, 2015 resulted in a "Satisfactory" rating.

Mr. Barns was well prepared for this FTE having all requested documents and files ready for review in a three ring binder. All records were spread out in an organized manner across their conference room table.

KCL is a member of the Georgia Motorcoach Owners Association (GMOA) attending their meetings and seminars, and Lancer Insurance Company provides them with numerous training videos that are used when hiring new drivers. Mr. Landers, their part-time safety and compliance supervisor, is also a full time Atlanta police officer. He has taken certified courses in FEMA, CPR, DDC, and Human Resources administration. No concerns were noted in this factor.

Overall Results of Motor Carrier Compliance Audit Report

Citation

Violation and Comments

2) Driver

Inspection No.: 2152382

A motor carrier's policies, procedures and controls, as they relate to qualifying and hiring potential drivers, are evaluated in this factor. An evaluation is also made of the process whereby data resulting from the carrier's program of testing for controlled substances and alcohol is collected, reviewed, and managed by the carrier.

An audit of selected driver qualification files is conducted in order to determine the effectiveness of the carrier's procedure. It is also a means of determining the extent of Management's knowledge of the regulations and how they apply to operations.

KCL is using the services of a third party administrator (TPA) for all alcohol and controlled substance testing. A review of the laboratory aggregate statistical reports verifies testing minimums were exceeded. Mr. Landers will now be the designated employee representative, taking the place Mrs. Parker who is no longer employed with the company. Mr. Landers is now responsible for maintaining all records related to their alcohol and controlled substance testing program.

The laboratory aggregate statistical reports noted one post accident test. This was an error made by the carrier in sending a driver for this type of test when the accident was not recordable under the definition in Part 390.5 of the FMCSRs. The driver received a citation and the carrier sent the driver for testing in error. Mr. Barns and Mr. Hubbard were referred to the above Part. The regulations and clarifications were then discussed.

KCL was not able to present reasonable suspicion training certificates during this inspection. Mr. Barns was advised to obtain them from Mr. Landers and himself.

Mr. Barns is responsible for all DQ files. A review of five files was completed, and although there were general violations due to lack of oversight, they were found to be in compliance for the most part. There are three files for each driver separated by request of prior US/DOT inspectors

Overall Results of Motor Carrier Compliance Audit Report

Citation

Violation and Comments

7/391.51(b)(2)

Has the carrier failed to maintain original inquiries into drivers' motor vehicle driving records (MVRs) in its drivers' qualification (DQ) files?

Not all files contained evidence that MVRs were retained for every driver. Driver M. Crawley was hired March 19, 2016, but her motor vehicle records were obtained 39 days prior to this on February 10, 2016. Mr. Barns was shown this violation as being beyond the 30 days allowed to collect such documents.

Regulations specify that a copy of the driving record from the State that issued a driver's operator's license be obtained within 30 days of a driver's employment date (or first use in a CMV) and be maintained as a part of the driver's qualification file. It must cover at least three years prior to the driver's employment (or first use in a CMV). This information is necessary to ensure a driver has not incurred or been convicted of a serious traffic violation that may prohibit their operation of a CMV

28/391.25(a)

Has the carrier failed to make an inquiry to obtain the MVR of each driver, covering at least the preceding 12 months (annual review), to the appropriate agency of every State in which the driver held a license to operate any CMV?

The carrier has failed to make an annual inquiry into each driver's state driving record. The file of driver S. Simpson was missing this document. The review should have taken place in December 2015.

A driver's motor vehicle record (MVR) for the preceding 12 months must be obtained and reviewed. For a motor carrier to conduct the annual review required by 391.25, the driver's motor vehicle record is a necessity. The MVR should be compared against the annual list of violations submitted by drivers annually, which is required by 391.27. Furthermore, drivers of certain CMVs are required to inform a motor carrier when they receive citations for certain moving violations or when a license is suspended or revoked. Failing to periodically review a driver's driving record or to conduct the annual review may result in the use of a driver that is not properly licensed or has committed serious violations that could be cause for disqualification. Using such a driver places the carrier at risk of unnecessary liability

Overall Results of Motor Carrier Compliance Audit Report

Citation

Violation and Comments

31/391.25

Has the carrier failed to conduct, and document, an annual review (consisting of all required elements) of its drivers when required?

The carrier has not made an annual determination of every driver's continued ability to operate a CMV safely. The file of driver S. Simpson was missing this document. The review should have taken place in December 2015.

To do so, a driver's motor vehicle record (MVR) for the preceding 12 months must be obtained and reviewed. Also, a motor carrier must require drivers to make and submit a list of traffic violations for which they were convicted during the preceding 12 months. The carrier must consider all accident involvement, the driver's driving record and any violations of applicable regulations as part of his/her annual review. The individual conducting the review should sufficiently knowledgeable to make this determination and ensure the driver is not disqualified pursuant to the provisions of Sections 391.15 and/or 383.51.

A carrier should have a policy and a method or procedure to make sure that these reviews are conducted at least annually. The policy should include standards that if exceeded may result in a drivers ineligibility to drive a CMV for the carrier

35/382.601 (d)

Can the carrier document that it has obtained a signature certification from drivers regarding its policy, which includes alcohol abuse and controlled substances use information, training, and referral?

The carrier was unable to document, by virtue of drivers' certifications, that it has provided educational material to drivers, G. Andrews, A. Ortiz, and M. Key, regarding referral, evaluation and treatment for drug/alcohol use/abuse.

Under the current regulations, the motor carrier is required to promulgate a policy which includes the provisions for referral, evaluation and treatment for a driver who has engaged in conduct prohibited by Subpart B of Part 382. The carrier is required to obtain/retain a signature certification from a driver verifying receipt of the carrier's policy. Also, guidance offered by the FMCSA notes that the carrier will be in violation if it used a driver who has refused to certify receipt of the carrier's policy

Overall Results of Motor Carrier Compliance Audit Report

Citation

Violation and Comments

73/385.5(b)

Has the carrier taken corrective actions relative to violations noted during previous State, Federal or other inspections for this factor?

Violations relative to this factor, which were brought to the carrier's attention during a previous State or Federal review or other review, have not been corrected. Missing annual reviews were cited on the prior FTE on December 16, 2014.

It is expected that violations and operational deficiencies that are brought to a carrier's attention will be corrected. The carrier should have taken corrective action to prevent future violations. When similar violations or operational deficiencies are again found during a subsequent review it has the appearance that the carrier has either neglected or refused to make corrections to known concerns.

No other concerns were noted in this factor.

Overall Results of Motor Carrier Compliance Audit Report

Citation

Violation and Comments

3) Operational

Inspection No.: 2152382

In this factor the motor carrier's management controls relating to drivers hours-of-service are evaluated. The primary document used for recording time is the record of duty status (driver's log or RODS), as defined in Part 395 of the FMCSR. Part 390 addresses additional training and instructional requirements deemed the responsibility of the motor carrier.

All RODS are filed in a neat and organized manner in individual driver envelopes. A review of seven drivers, and approximately 300 logs were completed. No violations of the 10, 15 or 70 hour rule were discovered. Some form and manner violations were noted on two of the seven drivers logs reviewed. It was pointed out to Mr. Barns that not all drivers are completing recaps. Although this is no longer required by the FMCSRs, it is good safe practice

8/395.8(d)

Are drivers' RODSs completed in the form and manner prescribed?

Not in all cases. Driver G. Andrews is failing to enter trip/charter numbers on the March and April logs reviewed. On March 18th the added line three incorrectly. On April 7th, driver S. Simpson failed to record her driving a non CMV to Lumberton, NC.

Drivers' RODS are required to be completed on a specific form and in a specified manner. The record of duty status is a legal document and it should be completed in the manner prescribed by regulation. The carrier's log audit program should detect these types of violations and require drivers to make corrections.

11/385.5(a)(7)/395

Do dispatchers and/or coordinators recap drivers' hours-of-service to ensure sufficient available hours to perform future driving?

No. There was no evidence to suggest that dispatchers or coordinators capture information to determine if a driver has sufficient hours to perform a planned trip within hours of service limitation.

Under the regulations, records of duty status are to be submitted to the carrier no later than 13 days from the date the record was completed. As such, the motor carrier may not always have documentation to determination if a driver has available hours of service. However, a driver is prohibited from exceeding the hours-of-service limitations and the motor carrier should have some method of monitoring a driver's total hour's on-duty, on a daily basis, to ensure compliance

Overall Results of Motor Carrier Compliance Audit Report

Citation

Violation and Comments

20/392.2

Has the carrier allowed drivers to operate vehicles not in compliance with the laws, ordinances and regulations of the jurisdictions in which they are operated?

Evidence in the carrier's files indicated that some drivers were convicted of traffic violations while driving the carrier's vehicles. Drivers were cited for moving violations on March 4, March 24, May 4th, and November 4, 2015. Mr. Barns was shown that the FMCSA "SMS" web-site shows that are at a possible intervention level of 59 percent. He and Mr. Landers are addressing these violations with the drivers, and documenting their actions.

Every CMV must be operated in accordance with the laws, ordinances, and regulations of the jurisdiction in which it is being operated. However, if the FMCSA regulations impose a higher standard of care than that law, ordinance or regulation, then the carrier must comply with the FMCSA regulations.

No other concerns in this factor

Overall Results of Motor Carrier Compliance Audit Report

Citation

Violation and Comments

4) Vehicle

Inspection No.: 2152382

The motor carrier's policies, procedures and controls as they relate to vehicle maintenance, inspection and repair are evaluated in this factor. Also, training, reporting, monitoring and maintenance of records for vehicle inspections, routine maintenance and repair of known defects are also evaluated. The primary documents reviewed are driver vehicle inspection reports (DVIR), roadside inspection reports, and vehicle maintenance files. Part 396 of the FMCSR defines the requirements for a systematic vehicle inspection, repair and maintenance program and what constitutes required records.

A critical performance element of this segment of the inspection is the carrier's roadside inspection performance for vehicles that have undergone inspection by various Federal, State or local jurisdictions. A motor carrier's vehicle out-of-service rate is based on the number of vehicles that have been inspected and how many of those inspections resulted in either a vehicle or driver being placed out-of-service (OOS). A carrier's vehicle out-of-service rate relates to the effectiveness of the carrier's preventive maintenance program and the quality of the pre-trip and post-trip inspections performed by their drivers.

The files for vehicles 111, 118, 120, 121, 123, and 124 were reviewed. On a positive note, unlike the prior FTE, this time the files are set up in binders, identified properly and have clear and accurate preventative maintenance documents in each file. The buses are maintained by a 3rd party vendor on the property for most repairs.

The scheduled preventative maintenance (SPM) is performed for some buses at 15,000 miles, and on newer engines at 30,000 miles. Two cases of verified deferred SPM were discovered which is not considered a pattern.

A review of the driver vehicle inspection reports (DVIRs) for the same buses, for the last 90 days was completed. As reported on the prior FTE, only two defects were reported on over 250 DVIRs submitted by their drivers. Although this could be possible it does not seem plausible considering the age of the equipment. Drivers who may be making their own repairs should be instructed to record the defect.

1/OOS RATE (VEHICLE

What is the carrier's VEHICLE OOS rate percentage? (3 inspection minimum, previous 12 months)

_____ %

Safety Measurement System (SMS) records indicate there were five inspections during the last 12 months. Not one vehicle was available for inspection during the review. There was no out-of-service violations noted which identifies the carriers' out of service percentage as ZERO

Overall Results of Motor Carrier Compliance Audit Report

Citation

Violation and Comments

8/396.3(a)/385.5

Do maintenance records indicate a pattern of deferred maintenance?

Yes. Not all vehicles were inspected or underwent routine service at intervals prescribed by the carrier. On January 5th bus 123 went 29,090 miles beyond the scheduled preventative maintenance (SPM) of 30,000 miles. On April 10, 2015 bus 124 went 8,840 miles beyond the scheduled preventative maintenance (SPM) of 30,000 miles.

When service intervals have been established, the motor carrier must ensure that those service intervals are closely adhered to. A certain amount of leeway to those intervals may be necessary at times; however, once a mileage interval extends beyond a predetermined interval, either by miles or time, the carrier runs the risk of using a vehicle that may not be safe and becomes exposed to increased liability should something go wrong that can be tied to maintenance, inspection or repair

27/385.5(b)

Has the carrier taken corrective actions relative to violations noted during previous State, Federal or other inspections for this factor?

Violations relative to deferred maintenance were brought to the carrier's attention during a previous State or Federal review or other review, have not been corrected.

It is expected that violations and operational deficiencies that are brought to a carrier's attention will be corrected. The carrier should have taken corrective action to prevent future violations. When similar violations or operational deficiencies are again found during a subsequent review it has the appearance that the carrier has either neglected or refused to make corrections to known concerns.

Overall Results of Motor Carrier Compliance Audit Report

Citation

Violation and Comments

6) Accidents: Recordable Rate per Million Miles

Inspection No.: 2152382

This factor addresses the carrier's rate of recordable accidents per million miles during the past 12 months. It is calculated by multiplying the number of accidents by one million, then dividing that number by the number of miles traveled for the same period. It will be used only when a motor carrier incurs two or more recordable accidents within the 12 months prior to the inspection. All carriers, other than urban (100 mile radius) carriers, with a recordable accident rate greater than 1.5 will receive an unsatisfactory rating for this factor. Changes in the regulations effectively removed "preventability and/or non-preventability" from the recordable determination process.

Recordable accident, as defined in 49 CFR 390.5, means an accident involving a commercial motor vehicle operating on a public road in interstate or intrastate commerce which results in a fatality, bodily injury to a person who as a result of the injury immediately receives medical treatment away from the scene of the accident; and/or one or more motor vehicles incurring disabling damage as a result of the accident requiring the motor vehicle to be transported away from the scene by a tow truck or other motor vehicle.

KCL was able to present accident registers for the last three years. Mr. Landers is knowledgeable of the regulations

1/CRASH RATE

What is the carrier's recordable crash rate per million miles for the previous twelve (12) months? NOTE: must obtain mileage (miles for which the carrier pays road taxes); check crash register, MCMIS profile or files.

During the past 12 months the carrier has not been involved in any recordable accidents while operating 597,789 miles. The carrier's recordable accident rate is reported as zero.

Overall Results of Motor Carrier Compliance Audit Report

Citation

Violation and Comments

7) DTMO/PASSENGER

Inspection No.: 2152382

Factor Seven is designed to evaluate the carrier's knowledge of and compliance with the guidelines outlined in the Military Bus Agreement (MBA) and other contractual issues required of the carrier to remain approved by DTMO. The MBA contains specific operational procedures for which the carrier must abide. Failure to do so could risk disqualification for failing to honor the provisions of their agreement with DTMO.

Mr. Harmon is the point of contact (POC) for military trips and is knowledgeable of the MBA rules and regulations. There were no negative issues related to complaints or prior SSS inspections found on record for this carrier

PART 2

FEDERAL MOTOR CARRIER

SAFETY FORM

KINGSMEN COACH LINES
OPERATING AUTHORITY



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

400 7th Street SW
Washington, DC 20590

SERVICE DATE
November 2, 2006

DECISION
MC-570511
KINGSMEN COACH LINE, LLC
CONLEY, GA
REENTITLED
KINGMEN COACH LINE, LLC

On October 13, 2006, applicant filed a request to have the Federal Motor Carrier Safety Administration's records changed to reflect a name change.

Presently, this applicant has no active authority on file with the Federal Motor Carrier Safety Administration. For purposes of changing the FMCSA's records, this name change will be processed.

It is ordered:

The Federal Motor Carrier Safety Administration's records are amended to reflect the carrier's name as KINGMEN COACH LINE, LLC.

The applicant must establish that it is in full compliance with the statute and the insurance regulations by having amended filings on prescribed FMCSA forms (BMC91 or 91X or 82 for bodily injury and property damage liability, BMC 34 or 83 for cargo liability, or a BMC 84 or 85 for property broker security and BOC-3 for designation of agents upon whom process may be served) submitted on its behalf. Copies of Form MCS-90 or other "certificates of insurance" are not acceptable evidence of insurance compliance. Insurance and BOC-3 filings should be sent to Federal Motor Carrier Safety Administration, 400 Virginia Avenue, SW, Suite 600, Washington, DC 20024.

If the applicant's authority has been revoked, it may submit a written request for reinstatement to the Federal Motor Carrier Safety Administration, P.O. Box 70935, Charlotte, NC 28272-0935 accompanied by a filing fee of \$80, in addition to submitting appropriate insurance filings on the prescribed FMCSA forms. If a motor carrier has an unsatisfactory safety rating, its authority registration will not be reinstated, and it should contact the nearest FMCSA Division Office to arrange for a review of its safety compliance prior to seeking reinstatement.

Decided: October 30, 2006

By the Federal Motor Carrier Safety Administration

Angeli Sebastian, Chief
Information Systems Division

NC/I

UNIFIED

CARRIER

REGISTRATION SYSTEM

[VCA Home](#) [Logout](#) [Contact Us](#)

Home

Registration Home

[Unified Carrier Registration](#)

UCR registration is complete.

Please print this page for your records and close the browser window.

If you paid using a credit card on the internet, the charge will be reflected as 'UCR Fees' on your statement.

Receipt number: 2015500072984
Registration Year: 2015
Expiration Date: 12/31/2015
Legal Name: KINGSMEN COACH LINES LLC
USDOT Number: 252315
MC Number: 570511
Telephone Number: 4043629339
Base State: GA
Business Address: 1570 Cedar Grove Road
 Conley, GA 30288
Mailing Address: P O Box 661
 Conley, GA 30288
Classification: Motor Carrier

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[Printout Details](#)

Transaction Type	Total Vehicles	Certified By	Paid Date	Fee Paid	Other Fee
REGISTRATION	12	DEANA REDD	11/11/2014	\$452.00	\$4.00
Total	12			\$452.00	



Georgia Department of Revenue

Processing Center - Motor Vehicle

Unified Carrier Registration

USDOT No: 252315

MC No: 570511

MX No:

Registration Year: 2014

Receipt Number: 0000252315131115030916

Legal Name: KINGSMEN COACH LINES LLC

DBA Name: KINGSMEN COACH LINES LLC

Telephone: 4043629339

Business Address: 1570 CEDAR GROVE ROAD

CONLEY, GA 30288

Mailing Address: P O BOX 661

CONLEY, GA 30288

Classification: Motor Carrier

Total Vehicles: 12

Certified By: Theresa Lovvorn

Payment Date: Friday, November 15, 2013

UCR Reg. Fee Paid: \$452.00

Payment Type: Check

Other Usage Fee: \$0.00

UNIFIED CARRIER REGISTRATION FORM - YEAR 2014

SECTION 1: GENERAL INFORMATION

ISDOT Number 252315	MC or MX Number 570511	FF Number	Telephone Number 404.362.9339	Fax Number
Legal Name KINGSMEN COACH LINES LLC			E-Mail Address	
Doing Business Under The Following Name (DBA)				
Principal Place Of Business Street address (See Instructions) 1570 CEDAR GROVE ROAD				
Principal Business City CONLEY		State GA	Zip Code 30288	
Mailing Street Address PO BOX 661				
Mailing City CONLEY		Mailing State GA	Zip Code 30288	

SECTION 2: CLASSIFICATION - Check All That Apply

☒ Motor Carrier ☐ Motor Private Carrier ☐ Broker ☐ Leasing Company ☐ Freight Forwarder

SECTION 3: FEES DUE - BROKERS, FREIGHT FORWARDERS AND LEASING COMPANIES ONLY

Note: If your company is also a motor carrier or motor private carrier, skip this section and go to section 4.

Brokers, freight forwarders and leasing companies (not combined with a motor carrier entity), please submit the amount due of \$76 in the form of payment acceptable by your base state and go to Section 7.

SECTION 4: NO. OF MOTOR VEHICLES - MOTOR CARRIER & MOTOR PRIVATE CARRIER

Check only one box:

Option A ☒ The number of vehicles shown below has been taken from section 26 of your last reported MCS-150 form.

Option B ☐ The number of vehicles shown below is the total number owned and operated for the 12-month period ending June 30, 2012.

See Instructions for additional requirements if you select Option B.

LINE NO.	NUMBER OF STRAIGHT TRUCKS AND TRACTORS (COLUMN A)	(COLUMN B)	NUMBER OF MOTOR CARRIERS, SCHOOL BUSES, MINI-BUSES, VANS AND LIMOUSINES (COLUMN C)	TOTAL (COLUMN D)
1	12			12
2	Subtract: (A) The number of vehicles on Line 1 in Column C above that has a vehicle capacity of 10 or less passengers, including the driver. (B) (Optional) The number of vehicles on Line 1 in Column A above that are used exclusively in intrastate transportation. You are required to maintain a list of vehicles excluded under this option. See Instructions for additional requirements if you select this option.			
3	(Optional) Add a number of vehicles not shown on Line 1 above that are: (A) Commercial motor vehicles operating exclusively in intrastate commerce. (See instructions for definition of commercial motor vehicle.) (B) Used in commerce to transport passengers or property for compensation and have a GVWR or GVW of 10,000 lbs or less, or a passenger capacity of 10 or less, including the driver.			
4	Total Number of Vehicles (Line 1 minus Line 2 plus Line 3)			12

SECTION 5: FEE TABLE

Number of Vehicles	Amount Due	Number of Vehicles	Amount Due	Number of Vehicles	Amount Due
0-2	\$76	6-20	\$452	101-1000	\$7,511
3-5	\$227	21-100	\$1,576	1001 or more	\$73,346

SECTION 6: FEES DUE - MOTOR CARRIER & MOTOR PRIVATE CARRIER

Using the number of vehicles in Section 4, Line 4 above, enter the Amount Due from the table above.

Note: See last page of this pamphlet for the types of payment your selected base state will accept.

\$ 452.00

SECTION 7: CERTIFICATION

I, the undersigned, under penalty for false statement, certify that the above information is true and correct and that I am authorized to execute and file this document on behalf of the applicant. (Penalty provisions subject to the laws of the registration state.)

Name Of Owner Or Authorized Representative (Printed) Theresa Lovvorn	Date
Signature <i>Theresa Lovvorn</i>	Title Agent

INSURANCE

**CERTIFICATE OF LIABILITY INSURANCE**

7/5/2016

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

PRODUCER Allen Insurance Group, Inc 6525 The Corners Pkwy, NW #211 Norcross GA 30092		CONTACT NAME: PHONE (A/C, No. Ext): (770) 368-1511 FAX (A/C, No): (770) 416-1122 E-MAIL: ADDRESS: PRODUCER: CUSTOMER ID: 00006252													
INSURED Kingsmen Coach Lines LLC P.O. Box 661 Conley GA 30288		INSURER(S) AFFORDING COVERAGE <table border="1"> <tr> <td>INSURER A: Lancer Insurance Co</td> <td>26077</td> </tr> <tr> <td>INSURER B: Pennsylvania Mfrs Assn</td> <td>12262</td> </tr> <tr> <td>INSURER C:</td> <td></td> </tr> <tr> <td>INSURER D:</td> <td></td> </tr> <tr> <td>INSURER E:</td> <td></td> </tr> <tr> <td>INSURER F:</td> <td></td> </tr> </table>		INSURER A: Lancer Insurance Co	26077	INSURER B: Pennsylvania Mfrs Assn	12262	INSURER C:		INSURER D:		INSURER E:		INSURER F:	
INSURER A: Lancer Insurance Co	26077														
INSURER B: Pennsylvania Mfrs Assn	12262														
INSURER C:															
INSURER D:															
INSURER E:															
INSURER F:															

COVERAGES

CERTIFICATE NUMBER: CL1142603802

REVISION NUMBER:

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INBR LTR	TYPE OF INSURANCE	ADDL SUBR INSR WYU	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
A	GENERAL LIABILITY					EACH OCCURRENCE \$ 2,000,000
	COMMERCIAL GENERAL LIABILITY					DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 100,000
	CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR		GL155959#15	4/27/2016	4/27/2017	MED EXP (Any one person) \$ 5,000
						PERSONAL & ADV INJURY \$ 2,000,000
	GEN'L AGGREGATE LIMIT APPLIES PER POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC <input type="checkbox"/>					GENERAL AGGREGATE \$ 2,000,000
						PRODUCTS - COMPROP AGG \$ N/A
A	AUTOMOBILE LIABILITY					COMBINED SINGLE LIMIT (Ea accident) \$ 5,000,000
	ANY AUTO					BODILY INJURY (Per person) \$
	<input checked="" type="checkbox"/> ALL OWNED AUTOS		BA155563#14	4/27/2016	4/27/2017	BODILY INJURY (Per accident) \$
	<input checked="" type="checkbox"/> SCHEDULED AUTOS					PROPERTY DAMAGE (Per accident) \$
	HIRED AUTOS					Uninsured motorist combined \$
	NON-OWNED AUTOS					\$
	UMBRELLA LIAE					EACH OCCURRENCE \$
	EXCESS LIAE					AGGREGATE \$
	DEDUCTIBLE					\$
	RETENTION \$					\$
B	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY					<input checked="" type="checkbox"/> WC STATUTORY LIMITS <input type="checkbox"/> OTHER
	ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH)	Y/N <input checked="" type="checkbox"/> N/A	2015014342796	12/22/2015	12/22/2016	E.L. EACH ACCIDENT \$ 1,000,000
	If yes, describe under DESCRIPTION OF OPERATIONS below					E.L. DISEASE - EA EMPLOYEE \$ 1,000,000
						E.L. DISEASE - POLICY LIMIT \$ 1,000,000

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (Attach ACORD 101, Additional Remarks Schedule, if more space is required)

CERTIFICATE HOLDER

(256) 372-5223

Alabama A & M University
 Attn: Jeffrey L. Robinson
 P.O. Box 1627
 Normal, AL 35762

CANCELLATION

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.

AUTHORIZED REPRESENTATIVE

RECORD OF REGULATORY VIOLATION AND ROADSIDE

KINGSMEN COACH LINES
LLC

U.S. DOT#: 252315

Address: 1570 CEDAR GROVE ROAD
CONLEY, GA 30288-1203

Number of Vehicles: 11

Number of Drivers: 14

Number of Inspections: 28

Safety Rating & OOS
Rates
(As of 07/01/2016 updated daily
from [SAFER](#))
SATISFACTORY

(Rating Date: 05/15/2015)

Out of Service Rates

Type	OOS %	National Avg %
Vehicle	4.8	20.7
Driver	8.0	5.5
Hazmat		4.5

Licensing and Insurance
(As of 07/01/2016 updated hourly
from [L&I](#))
Active For-Hire Authority

Type	Yes/No	MC#/MX#
Property	No	
Passenger	Yes	MC-570511
Household Goods	No	
Broker	No	

BASIC Status (Public Passenger Carrier View) ?

Behavior Analysis & Safety Improvement Categories (BASICS)

Based on a 24-month record ending May 27, 2016



Unsafe Driving

Not Public
Crash IndicatorHours-of-Service
ComplianceVehicle
MaintenanceControlled
Substances
and AlcoholNot Public
Hazardous
Materials
Compliance

Driver Fitness



Denotes this carrier exceeds the FMCSA intervention [threshold](#) relative to its safety event grouping based upon roadside data and/or has been cited with one or more Acute/Critical Violations within the past 12 months during an investigation. Therefore, this carrier may be prioritized for an intervention action and roadside inspection.

BASIC: Hours-of-Service Compliance
ON-ROAD +
INVESTIGATION
On-Road Performance
Measure: 1.20 ?
Percentile: 62%

Safety Event Group: 21-100 relevant driver inspections

Scale 0 to 100; 0 indicates the best safety performance.

Total Inspections with
Violations used in SMS: 12
Total Crashes* : 0


*Crashes listed represent a motor carrier's involvement in reportable crashes, regardless of the carrier's or driver's role in the crash. Continue for details.


USE OF SMS DATA/INFORMATION

FAST Act of 2015:

Readers should not draw conclusions about a carrier's overall safety condition simply based on the data displayed in this system. Unless a motor carrier has received an UNSATISFACTORY safety rating under part 385 of title 49, Code of Federal Regulations, or has otherwise been ordered to discontinue operations by the Federal Motor Carrier Safety Administration, it is authorized to operate on the Nation's roadways.

Safety Measurement System:

The data in the Safety Measurement System (SMS) is performance data used by the Agency and Enforcement Community. A  symbol, based on that data, indicates that FMCSA may prioritize a motor carrier for further monitoring.

The  symbol is not intended to imply any federal safety rating of the carrier pursuant to 49 USC 31144. Readers should not draw conclusions about a carrier's overall safety condition simply based on the data displayed in this system. Unless a motor carrier in the SMS has received an UNSATISFACTORY safety rating pursuant to 49 CFR Part 385, or has otherwise been ordered to discontinue operations by the FMCSA, it is authorized to operate on the nation's roadways.

Motor carrier safety ratings are available at <http://safer.fmcsa.dot.gov> and motor carrier licensing and insurance status are available at <http://li-public.fmcsa.dot.gov/>.

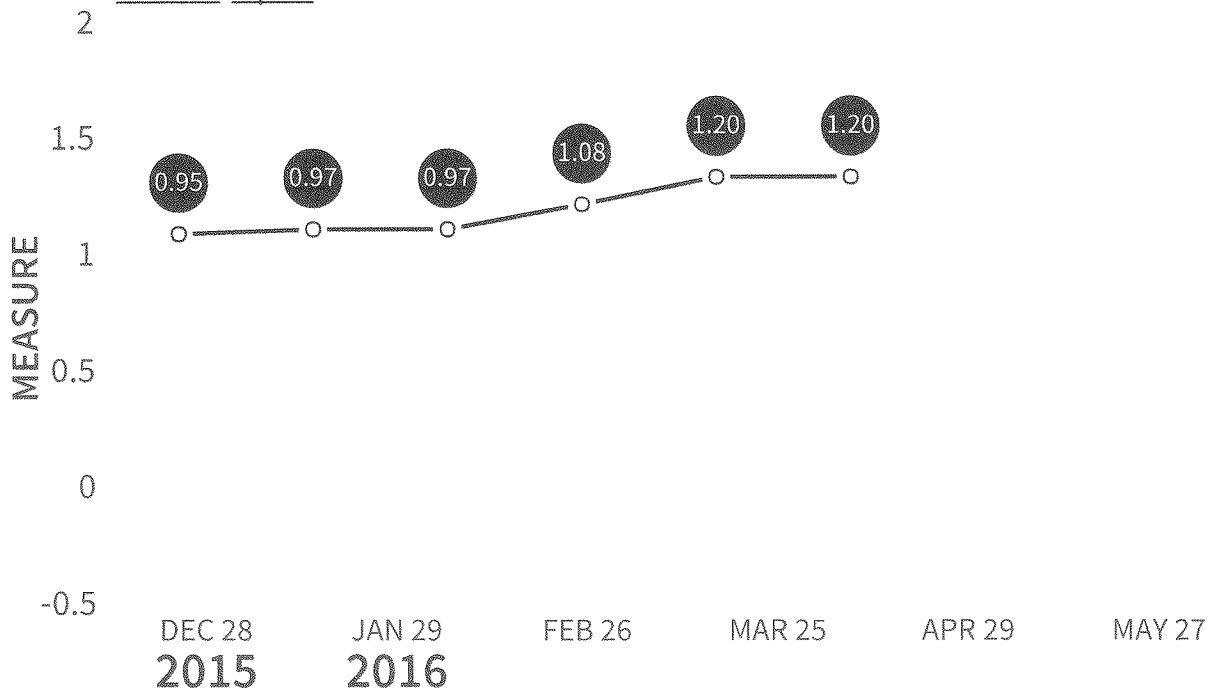
62% of motor carriers in the same safety event group have better on-road performance than this motor carrier.

Investigation Results

No Acute/Critical Violations Discovered

CARRIER MEASURE OVER TIME

This graph displays a carrier's measure based on 24 months of on-road performance. Zero indicates the best performance. To see how the measure is calculated [click here](#). To see how the measure relates to percentile [click here](#). [Expand](#) for more information.



VIOLATION SUMMARY

HOS Compliance Violations: 4

Violations	Description	# Violations	# OOS Violations	Violation Severity Weight
395.8F01	Drivers record of duty status not current	2	0	5
395.8(f)(1)	Driver's record of duty status not current	1	0	5
395.8(k)(2)	Driver failing to retain previous 7 days' logs	1	1	5

INSPECTION HISTORY

Driver Inspections: 24

INVESTIGATION RESULTS

HOS Compliance Acute/Critical Violations: 0

Summary of Activities

The summary includes information on the 5 most recent investigations and 24 months of inspections and crash history.

Most Recent Investigation: 4/29/2015
(Onsite Comprehensive Investigation)
Total Inspections: 28
Total Inspections without Violations used in SMS: 16

Carrier Registration

Subject to Passenger Threshold

Penalties History

(Six years as of 07/01/2016 updated daily from [FMCSA](#))

No penalties found

PART 3

FEDERAL MOTOR CARRIER

SAFETY FORM

10. Company must have a driver drug and alcohol testing program that complies with U.S. dot regulations. _____

11. If your trips are not completed within the legal limit of 10 driving hours, company must agree that there will be a second driver or overnight rest stop scheduled to legally complete the trip WILL HAVE RELAY (SECOND) DRIVER

12. Company must have its buses inspected annually. Provide documentation of by whom required KINGSMEN SHOP (SEE ATTACHED)

COMPANIES MUST PROVIDE A COPY OF THIS DOCUMENT AT THE TIME OF PICK UP

13. Company must have the required \$5 million of public liability insurance: YES

14. Does the company subcontract with others for equipment and/or drivers? If so, what is the name of the second bus company and its USDOT number? University must approve any subcontractor with others for equipment or drivers. Subcontractor must meet all regulations stated in this bid.

NO

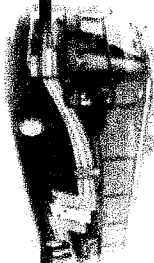
ATTACH TO THIS FORM

15. Company must provide notification procedures for roadside emergencies and breakdowns SEE ATTACHED

16. All drivers must be equipped with wireless communication devices YES (CELL PHONES)

PRESENT AT THE TIME OF PICK UP

**COMMERCIAL DRIVER'S
LICENSE P ENDORSMENT**



Kingsmen Coach Lines

Mailing Address P. O. Box 661
Conley, Georgia 39288-0661
(404) 362-9339 - Fax (404) 362-0254
www.kingsmencoachlines.com

DATE: July 01, 2016

COMPANY NAME: Kingsmen Coach Lines, LLC

Qty.	DRIVER	DRIVERS LICENSE NUMBER	STATE LICENSE ISSUED	DATE OF BIRTH
1	Bernard Barnes	CDL 036269428 END. P	GA	3/7/1956
2	Henrietta Chatman	CDL 036269428 END. P	GA	12/12/1950
3	Melia Crawley	CDL 036269428 END. P	GA	12/4/1966
4	James Randolph Harris	CDL 036269428 END. P	GA	8/2/1948
5	John Horne	CDL 036269428 END. P	GA	11/30/1944
6	Melvin Jefferson	CDL 036269428 END. P	GA	10/12/1956
7	Maurice D. Key	CDL 036269428 END. P	GA	1/6/1981
8	George Andrews	CDL 036269428 END. P	GA	12/12/1972
9	Rolando E. Mullings	CDL 036269428 END. P	SC	6/3/1970
10	Andre Mckoy	CDL 036269428 END. P	GA	11/24/1962
11	Joseph McZorn	CDL 036269428 END. P	GA	3/15/1940
12	Anita Ortiz	CDL 036269428 END. P	GA	12/4/1965
13	Shari Simpson	CDL 036269428 END. P	GA	9/20/1963
14	Bartachious Jones	CDL 036269428 END. P	GA	6/4/1966
15	Vincent Mark	CDL 036269428 END. P	GA	11/13/1971
16				
17				
18				
19				
20				

ANNUAL VEHICLE INSPECTION REPORT

ANNUAL VEHICLE INSPECTION REPORT

VEHICLE HISTORY RECORD

REPORT
NUMBER

FLEET UNIT NUMBER

37158975

111

DATE 4-13-16

FOR CARRIER OPERATOR

INSPECTOR'S NAME (PRINT OR TYPE)

KINGSMAI COACH LINE

JW PARKER

ADDRESS
1570 CEDAR GROVE RD

THIS INSPECTOR MEETS THE QUALIFICATION REQUIREMENTS IN SECTION 396.19.

☒ YESCITY, STATE, ZIP CODE
CLAY, GA 30288VEHICLE IDENTIFICATION (✓ AND COMPLETE) ☐ LIC. PLATE NO. ☒ VIN ☐ OTHER
YE2CC16B07246757VEHICLE TYPE ☐ TRACTOR ☐ TRAILER ☐ TRUCK ☒ BUS
☐ (OTHER)

INSPECTION AGENCY/LOCATION (OPTIONAL)

1554 CEDAR GROVE RD, CLAY, GA 30288

VEHICLE COMPONENTS INSPECTED

OK	NEEDS REPAIR	REPAIRED DATE	ITEM	OK	NEEDS REPAIR	REPAIRED DATE	ITEM	OK	NEEDS REPAIR	REPAIRED DATE	ITEM
<input checked="" type="checkbox"/>			1. BRAKE SYSTEM	<input checked="" type="checkbox"/>			6. SAFE LOADING	<input checked="" type="checkbox"/>			10. TIRES
<input checked="" type="checkbox"/>			a. Service Brakes	<input checked="" type="checkbox"/>			a. Part(s) of vehicle or condition of loading such that the spare tire or any part of the load or dunnage can fall onto the roadway.	<input checked="" type="checkbox"/>			a. Tires on any steering axle of a power unit.
<input checked="" type="checkbox"/>			b. Parking Brake System	<input checked="" type="checkbox"/>			b. Protection against shifting cargo.	<input checked="" type="checkbox"/>			b. All other tires.
<input checked="" type="checkbox"/>			c. Brake Drums or Rotors	<input checked="" type="checkbox"/>			c. Container securement devices on intermodal equipment.	<input checked="" type="checkbox"/>			11. WHEELS AND RIMS
<input checked="" type="checkbox"/>			d. Brake Hose	<input checked="" type="checkbox"/>			a. Steering Wheel Free Play	<input checked="" type="checkbox"/>			a. Lock or Side Ring
<input checked="" type="checkbox"/>			e. Brake Tubing	<input checked="" type="checkbox"/>			b. Steering Column	<input checked="" type="checkbox"/>			b. Wheels and Rims
<input checked="" type="checkbox"/>			f. Low Pressure Warning Device	<input checked="" type="checkbox"/>			c. Front Axle Beam and All Steering Components Other Than Steering Column	<input checked="" type="checkbox"/>			c. Fasteners
<input checked="" type="checkbox"/>			g. Tractor Protection Valve	<input checked="" type="checkbox"/>			d. Steering Gear Box	<input checked="" type="checkbox"/>			d. Welds
<input checked="" type="checkbox"/>			h. Air Compressor	<input checked="" type="checkbox"/>			e. Pitman Arm	<input checked="" type="checkbox"/>			12. WINDSHIELD GLAZING
<input checked="" type="checkbox"/>			i. Electric Brakes	<input checked="" type="checkbox"/>			f. Power Steering	<input checked="" type="checkbox"/>			Requirements and exceptions as stated pertaining to any crack, discoloration or vision reducing matter (reference 393.60 for exceptions).
<input checked="" type="checkbox"/>			j. Hydraulic Brakes	<input checked="" type="checkbox"/>			g. Ball and Socket Joints	<input checked="" type="checkbox"/>			13. WINDSHIELD WIPERS
<input checked="" type="checkbox"/>			k. Vacuum Systems	<input checked="" type="checkbox"/>			h. Tie Rods and Drag Links	<input checked="" type="checkbox"/>			Any power unit that has an inoperative wiper, or missing or damaged parts that render it ineffective.
<input checked="" type="checkbox"/>			2. COUPLING DEVICES	<input checked="" type="checkbox"/>			i. Nuts	<input checked="" type="checkbox"/>			14. OTHER
<input checked="" type="checkbox"/>			a. Fifth Wheels	<input checked="" type="checkbox"/>			j. Steering System	<input checked="" type="checkbox"/>			List any other condition(s) which may prevent safe operation of this vehicle.
<input checked="" type="checkbox"/>			b. Pintle Hooks	<input checked="" type="checkbox"/>			8. SUSPENSION	<input checked="" type="checkbox"/>			Good condition
<input checked="" type="checkbox"/>			c. Drawbar/Towbar Eye	<input checked="" type="checkbox"/>			a. Any U-bolt(s), spring hanger(s), or other axle positioning part(s) cracked, broken, loose or missing resulting in shifting of an axle from its normal position.	<input checked="" type="checkbox"/>			
<input checked="" type="checkbox"/>			d. Drawbar/Towbar Tongue	<input checked="" type="checkbox"/>			b. Spring Assembly	<input checked="" type="checkbox"/>			
<input checked="" type="checkbox"/>			e. Safety Devices	<input checked="" type="checkbox"/>			c. Torque, Radius or Tracking Components	<input checked="" type="checkbox"/>			
<input checked="" type="checkbox"/>			f. Saddle-Mounts	<input checked="" type="checkbox"/>			9. FRAME	<input checked="" type="checkbox"/>			
<input checked="" type="checkbox"/>			3. EXHAUST SYSTEM	<input checked="" type="checkbox"/>			a. Frame Members	<input checked="" type="checkbox"/>			
<input checked="" type="checkbox"/>			a. Exhaust system leaking forward of or directly below the driver/sleeper compartment.	<input checked="" type="checkbox"/>			b. Tire and Wheel Clearance	<input checked="" type="checkbox"/>			
<input checked="" type="checkbox"/>			b. Bus exhaust system leaking or discharging in violation of standard.	<input checked="" type="checkbox"/>			c. Adjustable Axle Assemblies (Sliding Subframes)	<input checked="" type="checkbox"/>			
<input checked="" type="checkbox"/>			c. Exhaust system likely to burn, char, or damage the electrical wiring, fuel supply, or any combustible part of the motor vehicle.	<input checked="" type="checkbox"/>				<input checked="" type="checkbox"/>			
<input checked="" type="checkbox"/>			4. FUEL SYSTEM	<input checked="" type="checkbox"/>				<input checked="" type="checkbox"/>			
<input checked="" type="checkbox"/>			a. Visible leak.	<input checked="" type="checkbox"/>				<input checked="" type="checkbox"/>			
<input checked="" type="checkbox"/>			b. Fuel tank filler cap missing.	<input checked="" type="checkbox"/>				<input checked="" type="checkbox"/>			
<input checked="" type="checkbox"/>			c. Fuel tank securely attached.	<input checked="" type="checkbox"/>				<input checked="" type="checkbox"/>			
<input checked="" type="checkbox"/>			5. LIGHTING DEVICES	<input checked="" type="checkbox"/>				<input checked="" type="checkbox"/>			
<input checked="" type="checkbox"/>			All lighting devices and reflectors required by Part 393 shall be operable.	<input checked="" type="checkbox"/>				<input checked="" type="checkbox"/>			

INSTRUCTIONS: MARK COLUMN ENTRIES TO VERIFY INSPECTION: ☒ OK, ☒ NEEDS REPAIR, ☒ NA IF ITEMS DO NOT APPLY, _____ REPAIRED DATE

CERTIFICATION: THIS VEHICLE HAS PASSED ALL THE INSPECTION ITEMS FOR THE ANNUAL VEHICLE INSPECTION IN ACCORDANCE WITH 49 CFR PART 396.

ANNUAL VEHICLE INSPECTION REPORT

VEHICLE HISTORY RECORD

REPORT NUMBER	FLEET UNIT NUMBER
37156320	112
DATE 4/13/16	

VEHICLE CARRIER OPERATOR Kingsman Coach Line	INSPECTOR'S NAME (PRINT OR TYPE) J W PARKER
ADDRESS 1570 CEDAR GROVE RD.	THIS INSPECTOR MEETS THE QUALIFICATION REQUIREMENTS IN SECTION 396.19. <input checked="" type="checkbox"/> YES
CITY, STATE, ZIP CODE CONLEY, GA 30288	VEHICLE IDENTIFICATION (✓ AND COMPLETE) <input type="checkbox"/> LIC. PLATE NO. <input checked="" type="checkbox"/> VIN <input type="checkbox"/> OTHER 2M93J1A PA 37 W063785
VEHICLE TYPE <input type="checkbox"/> TRACTOR <input type="checkbox"/> TRAILER <input type="checkbox"/> TRUCK <input checked="" type="checkbox"/> BUS <input type="checkbox"/> (OTHER)	INSPECTION AGENCY/LOCATION (OPTIONAL) 1554 CEDAR GROVE RD, GA CONLEY, 30288

VEHICLE COMPONENTS INSPECTED

OK	NEEDS REPAIR	REPAIRED DATE	ITEM	OK	NEEDS REPAIR	REPAIRED DATE	ITEM	OK	NEEDS REPAIR	REPAIRED DATE	ITEM
<input checked="" type="checkbox"/>			1. BRAKE SYSTEM	<input checked="" type="checkbox"/>			6. SAFE LOADING	<input checked="" type="checkbox"/>			10. TIRES
<input checked="" type="checkbox"/>			a. Service Brakes	<input checked="" type="checkbox"/>			a. Part(s) of vehicle or condition of loading such that the spare tire or any part of the load or dunnage can fall onto the roadway.	<input checked="" type="checkbox"/>			a. Tires on any steering axle of a power unit.
<input checked="" type="checkbox"/>			b. Parking Brake System	<input checked="" type="checkbox"/>			b. Protection against shifting cargo.	<input checked="" type="checkbox"/>			b. All other tires.
<input checked="" type="checkbox"/>			c. Brake Drums or Rotors	<input checked="" type="checkbox"/>			c. Container securement devices on intermodal equipment.	<input checked="" type="checkbox"/>			11. WHEELS AND RIMS
<input checked="" type="checkbox"/>			d. Brake Hose	<input checked="" type="checkbox"/>				<input checked="" type="checkbox"/>			a. Lock or Side Ring
<input checked="" type="checkbox"/>			e. Brake Tubing	<input checked="" type="checkbox"/>				<input checked="" type="checkbox"/>			b. Wheels and Rims
<input checked="" type="checkbox"/>			f. Low Pressure Warning Device	<input checked="" type="checkbox"/>				<input checked="" type="checkbox"/>			c. Fasteners
<input checked="" type="checkbox"/>			g. Tractor Protection Valve	<input checked="" type="checkbox"/>				<input checked="" type="checkbox"/>			d. Welds
<input checked="" type="checkbox"/>			h. Air Compressor	<input checked="" type="checkbox"/>				<input checked="" type="checkbox"/>			12. WINDSHIELD GLAZING
<input checked="" type="checkbox"/>			i. Electric Brakes	<input checked="" type="checkbox"/>				<input checked="" type="checkbox"/>			Requirements and exceptions as stated pertaining to any crack, discoloration or vision reducing matter (reference 393.60 for exceptions).
<input checked="" type="checkbox"/>			j. Hydraulic Brakes	<input checked="" type="checkbox"/>				<input checked="" type="checkbox"/>			13. WINDSHIELD WIPERS
<input checked="" type="checkbox"/>			k. Vacuum Systems	<input checked="" type="checkbox"/>				<input checked="" type="checkbox"/>			Any power unit that has an inoperative wiper, or missing or damaged parts that render it ineffective.
<input checked="" type="checkbox"/>			2. COUPLING DEVICES	<input checked="" type="checkbox"/>			7. STEERING MECHANISM	<input checked="" type="checkbox"/>			14. OTHER
<input checked="" type="checkbox"/>			a. Fifth Wheels	<input checked="" type="checkbox"/>			a. Steering Wheel Free Play	<input checked="" type="checkbox"/>			List any other condition(s) which may prevent safe operation of this vehicle.
<input checked="" type="checkbox"/>			b. Pintle Hooks	<input checked="" type="checkbox"/>			b. Steering Column	<input checked="" type="checkbox"/>			Good operation condition
<input checked="" type="checkbox"/>			c. Drawbar/Towbar Eye	<input checked="" type="checkbox"/>			c. Front Axle Beam and All Steering Components Other Than Steering Column	<input checked="" type="checkbox"/>			
<input checked="" type="checkbox"/>			d. Drawbar/Towbar Tongue	<input checked="" type="checkbox"/>			d. Steering Gear Box	<input checked="" type="checkbox"/>			
<input checked="" type="checkbox"/>			e. Safety Devices	<input checked="" type="checkbox"/>			e. Pitman Arm	<input checked="" type="checkbox"/>			
<input checked="" type="checkbox"/>			f. Saddle-Mounts	<input checked="" type="checkbox"/>			f. Power Steering	<input checked="" type="checkbox"/>			
<input checked="" type="checkbox"/>			3. EXHAUST SYSTEM	<input checked="" type="checkbox"/>			g. Ball and Socket Joints	<input checked="" type="checkbox"/>			
<input checked="" type="checkbox"/>			a. Exhaust system leaking forward of or directly below the driver/sleeper compartment.	<input checked="" type="checkbox"/>			h. Tie Rods and Drag Links	<input checked="" type="checkbox"/>			
<input checked="" type="checkbox"/>			b. Bus exhaust system leaking or discharging in violation of standard.	<input checked="" type="checkbox"/>			i. Nuts	<input checked="" type="checkbox"/>			
<input checked="" type="checkbox"/>			c. Exhaust system likely to burn, char, or damage the electrical wiring, fuel supply, or any combustible part of the motor vehicle.	<input checked="" type="checkbox"/>			j. Steering System	<input checked="" type="checkbox"/>			
<input checked="" type="checkbox"/>			4. FUEL SYSTEM	<input checked="" type="checkbox"/>			8. SUSPENSION	<input checked="" type="checkbox"/>			
<input checked="" type="checkbox"/>			a. Visible leak.	<input checked="" type="checkbox"/>			a. Any U-bolt(s), spring hanger(s), or other axle positioning part(s) cracked, broken, loose or missing resulting in shifting of an axle from its normal position.	<input checked="" type="checkbox"/>			
<input checked="" type="checkbox"/>			b. Fuel tank filler cap missing.	<input checked="" type="checkbox"/>			b. Spring Assembly	<input checked="" type="checkbox"/>			
<input checked="" type="checkbox"/>			c. Fuel tank securely attached.	<input checked="" type="checkbox"/>			c. Torque, Radius or Tracking Components	<input checked="" type="checkbox"/>			
<input checked="" type="checkbox"/>			5. LIGHTING DEVICES	<input checked="" type="checkbox"/>			9. FRAME	<input checked="" type="checkbox"/>			
<input checked="" type="checkbox"/>			All lighting devices and reflectors required by Part 393 shall be operable.	<input checked="" type="checkbox"/>			a. Frame Members	<input checked="" type="checkbox"/>			
				<input checked="" type="checkbox"/>			b. Tire and Wheel Clearance	<input checked="" type="checkbox"/>			
				<input checked="" type="checkbox"/>			c. Adjustable Axle Assemblies (Sliding Subframes)	<input checked="" type="checkbox"/>			

INSTRUCTIONS: MARK COLUMN ENTRIES TO VERIFY INSPECTION: ☒ OK, ☒ NEEDS REPAIR, ☒ NA IF ITEMS DO NOT APPLY, _____ REPAIRED DATE

CERTIFICATION: THIS VEHICLE HAS PASSED ALL THE INSPECTION ITEMS FOR THE ANNUAL VEHICLE INSPECTION IN ACCORDANCE WITH 49 CFR PART 396.

VEHICLE HISTORY RECORD	
REPORT NUMBER	FLEET UNIT NUMBER
37191087	117
DATE 4-13-16	

VEHICLE COMPONENTS INSPECTED											
OK	NEEDS REPAIR	REPAIRED DATE	ITEM	OK	NEEDS REPAIR	REPAIRED DATE	ITEM	OK	NEEDS REPAIR	REPAIRED DATE	ITEM
1. BRAKE SYSTEM				6. SAFE LOADING				10. TIRES			
✓			a. Service Brakes	✓			a. Part(s) of vehicle or condition of loading such that the spare tire or any part of the load or dunnage can fall onto the roadway.	✓			a. Tires on any steering axle of a power unit.
✓			b. Parking Brake System				b. Protection against shifting cargo.	✓			b. All other tires.
✓			c. Brake Drums or Rotors				c. Container securement devices on intermodal equipment.				
✓			d. Brake Hose								
✓			e. Brake Tubing								
✓			f. Low Pressure Warning Device								
✓			g. Tractor Protection Valve								
✓			h. Air Compressor								
✓			i. Electric Brakes								
✓			j. Hydraulic Brakes								
✓			k. Vacuum Systems								
2. COUPLING DEVICES				7. STEERING MECHANISM				11. WHEELS AND RIMS			
✓			a. Fifth Wheels	✓			a. Steering Wheel Free Play	✓			a. Lock or Side Ring
✓			b. Pintle Hooks	✓			b. Steering Column	✓			b. Wheels and Rims
✓			c. Drawbar/Towbar Eye	✓			c. Front Axle Beam and All Steering Components Other Than Steering Column	✓			c. Fasteners
✓			d. Drawbar/Towbar Tongue	✓			d. Steering Gear Box	✓			d. Welds
✓			e. Safety Devices	✓			e. Pitman Arm				
✓			f. Saddle-Mounts	✓			f. Power Steering				
3. EXHAUST SYSTEM				8. SUSPENSION				12. WINDSHIELD GLAZING			
✓			a. Exhaust system leaking forward of or directly below the driver/sleeper compartment.	✓			a. Any U-bolt(s), spring hanger(s), or other axle positioning part(s) cracked, broken, loose or missing resulting in shifting of an axle from its normal position.	✓			Requirements and exceptions as stated pertaining to any crack, discoloration or vision reducing matter (reference 393.60 for exceptions).
✓			b. Bus exhaust system leaking or discharging in violation of standard.	✓			b. Spring Assembly				
✓			c. Exhaust system likely to burn, char, or damage the electrical wiring, fuel supply, or any combustible part of the motor vehicle.	✓			c. Torque, Radius or Tracking Components				
4. FUEL SYSTEM				9. FRAME				13. WINDSHIELD WIPERS			
✓			a. Visible leak.	✓			a. Frame Members	✓			Any power unit that has an inoperative wiper, or missing or damaged parts that render it ineffective.
✓			b. Fuel tank filler cap missing.	✓			b. Tire and Wheel Clearance				
✓			c. Fuel tank securely attached.	✓			c. Adjustable Axle Assemblies (Sliding Subframes)				
5. LIGHTING DEVICES								14. OTHER			
✓			All lighting devices and reflectors required by Part 393 shall be operable.					✓			List any other condition(s) which may prevent safe operation of this vehicle. <i>Good operation condition</i>

2241
(Rev. 11/12)

ANNUAL VEHICLE INSPECTION REPORT

VEHICLE HISTORY RECORD

REPORT
NUMBER

FLEET UNIT NUMBER

371 91086

118

DATE 4-13/16

FOR CARRIER OPERATOR

INSPECTOR'S NAME (PRINT OR TYPE)

KINGS MAN
ADDRESS 1570 CEDAR GROVE RD.

THIS INSPECTOR MEETS THE QUALIFICATION REQUIREMENTS IN SECTION 396.19.

☒ YES

CITY, STATE, ZIP CODE

VEHICLE IDENTIFICATION (✓ AND COMPLETE) ☐ LIC. PLATE NO. ☒ VIN ☐ OTHER

2M93JMPA77W064230

VEHICLE TYPE ☐ TRACTOR ☐ TRAILER ☐ TRUCK ☒ BUS

INSPECTION AGENCY/LOCATION (OPTIONAL)

☐ (OTHER)

1554 CEDAR GROVE RD, CONLEY, GA 30288

VEHICLE COMPONENTS INSPECTED

OK	NEEDS REPAIR	REPAIRED DATE	ITEM	OK	NEEDS REPAIR	REPAIRED DATE	ITEM	OK	NEEDS REPAIR	REPAIRED DATE	ITEM
			1. BRAKE SYSTEM				6. SAFE LOADING				10. TIRES
✓			a. Service Brakes	✓			a. Part(s) of vehicle or condition of loading such that the spare tire or any part of the load or dunnage can fall onto the roadway.	✓			a. Tires on any steering axle of a power unit.
✓			b. Parking Brake System	✓			b. Protection against shifting cargo.	✓			b. All other tires.
✓			c. Brake Drums or Rotors	✓			c. Container securement devices on intermodal equipment.	✓			11. WHEELS AND RIMS
✓			d. Brake Hose	✓			a. Steering Wheel Free Play	✓			a. Lock or Side Ring
✓			e. Brake Tubing	✓			b. Steering Column	✓			b. Wheels and Rims
✓			f. Low Pressure Warning Device	✓			c. Front Axle Beam and All Steering Components Other Than Steering Column	✓			c. Fasteners
✓			g. Tractor Protection Valve	✓			d. Steering Gear Box	✓			d. Welds
✓			h. Air Compressor	✓			e. Pitman Arm	✓			12. WINDSHIELD GLAZING
✓			i. Electric Brakes	✓			f. Power Steering	✓			Requirements and exceptions as stated pertaining to any crack, discoloration or vision reducing matter (reference 393.60 for exceptions).
✓			j. Hydraulic Brakes	✓			g. Ball and Socket Joints	✓			13. WINDSHIELD WIPERS
✓			k. Vacuum Systems	✓			h. Tie Rods and Drag Links	✓			Any power unit that has an inoperative wiper, or missing or damaged parts that render it ineffective.
			2. COUPLING DEVICES				7. STEERING MECHANISM				14. OTHER
✓			a. Fifth Wheels	✓			i. Nuts	✓			List any other condition(s) which may prevent safe operation of this vehicle.
✓			b. Pintle Hooks	✓			j. Steering System	✓			Good operation
✓			c. Drawbar/Towbar Eye	✓			8. SUSPENSION	✓			conditional
✓			d. Drawbar/Towbar Tongue	✓			a. Any U-bolt(s), spring hanger(s), or other axle positioning part(s) cracked, broken, loose or missing resulting in shifting of an axle from its normal position.	✓			
✓			e. Safety Devices	✓			b. Spring Assembly	✓			
✓			f. Saddle-Mounts	✓			c. Torque, Radius or Tracking Components	✓			
			3. EXHAUST SYSTEM				9. FRAME				
✓			a. Exhaust system leaking forward of or directly below the driver/sleeper compartment.	✓			a. Frame Members				
✓			b. Bus exhaust system leaking or discharging in violation of standard.	✓			b. Tire and Wheel Clearance				
✓			c. Exhaust system likely to burn, char, or damage the electrical wiring, fuel supply, or any combustible part of the motor vehicle.	✓			c. Adjustable Axle Assemblies (Sliding Subframes)				
			4. FUEL SYSTEM								
✓			a. Visible leak.	✓							
✓			b. Fuel tank filler cap missing.	✓							
✓			c. Fuel tank securely attached.	✓							
			5. LIGHTING DEVICES								
✓			All lighting devices and reflectors required by Part 393 shall be operable.	✓							

INSTRUCTIONS: MARK COLUMN ENTRIES TO VERIFY INSPECTION: ✓ OK, X NEEDS REPAIR, NA IF ITEMS DO NOT APPLY, REPAIRED DATE

CERTIFICATION: THIS VEHICLE HAS PASSED ALL THE INSPECTION ITEMS FOR THE ANNUAL VEHICLE INSPECTION IN ACCORDANCE WITH 49 CFR PART 396.

ANNUAL VEHICLE INSPECTION REPORT

VEHICLE HISTORY RECORD	
REPORT NUMBER	FLEET UNIT NUMBER
37190887	120
DATE 4/13/16	

FOR CARRIER OPERATOR <div style="font-size: 1.2em; font-family: cursive;">KINGSMAI COACH LINE</div>	INSPECTOR'S NAME (PRINT OR TYPE) <div style="font-size: 1.2em; font-family: cursive;">T W PARKER</div>
ADDRESS <div style="font-size: 1.2em; font-family: cursive;">1570 CEDAR GROVE RD</div>	THIS INSPECTOR MEETS THE QUALIFICATION REQUIREMENTS IN SECTION 396.19. <input checked="" type="checkbox"/> YES
CITY, STATE, ZIP CODE <div style="font-size: 1.2em; font-family: cursive;">CONLEY, GA 30288</div>	VEHICLE IDENTIFICATION (✓ AND COMPLETE) <input type="checkbox"/> LIC. PLATE NO. <input checked="" type="checkbox"/> VIN <input type="checkbox"/> OTHER <div style="font-size: 1.2em; font-family: cursive;">2M193JMPA97W064231</div>
VEHICLE TYPE <input type="checkbox"/> TRACTOR <input type="checkbox"/> TRAILER <input type="checkbox"/> TRUCK <input checked="" type="checkbox"/> BUS <input type="checkbox"/> (OTHER)	INSPECTION AGENCY/LOCATION (OPTIONAL) <div style="font-size: 1.2em; font-family: cursive;">1554 CEDAR GROVE RD, CONLEY, GA, 30288</div>

VEHICLE COMPONENTS INSPECTED											
OK	NEEDS REPAIR	REPAIRED DATE	ITEM	OK	NEEDS REPAIR	REPAIRED DATE	ITEM	OK	NEEDS REPAIR	REPAIRED DATE	ITEM
1. BRAKE SYSTEM											
<input checked="" type="checkbox"/>			a. Service Brakes	<input checked="" type="checkbox"/>			a. Part(s) of vehicle or condition of loading such that the spare tire or any part of the load or dunnage can fall onto the roadway.	<input checked="" type="checkbox"/>			a. Tires on any steering axle of a power unit.
<input checked="" type="checkbox"/>			b. Parking Brake System	<input checked="" type="checkbox"/>			b. Protection against shifting cargo.	<input checked="" type="checkbox"/>			b. All other tires.
<input checked="" type="checkbox"/>			c. Brake Drums or Rotors	<input checked="" type="checkbox"/>			c. Container securement devices on intermodal equipment.	<input checked="" type="checkbox"/>			11. WHEELS AND RIMS
<input checked="" type="checkbox"/>			d. Brake Hose	<input checked="" type="checkbox"/>				<input checked="" type="checkbox"/>			a. Lock or Side Ring
<input checked="" type="checkbox"/>			e. Brake Tubing	<input checked="" type="checkbox"/>				<input checked="" type="checkbox"/>			b. Wheels and Rims
<input checked="" type="checkbox"/>			f. Low Pressure Warning Device	<input checked="" type="checkbox"/>				<input checked="" type="checkbox"/>			c. Fasteners
<input checked="" type="checkbox"/>			g. Tractor Protection Valve	<input checked="" type="checkbox"/>				<input checked="" type="checkbox"/>			d. Welds
<input checked="" type="checkbox"/>			h. Air Compressor	<input checked="" type="checkbox"/>				<input checked="" type="checkbox"/>			12. WINDSHIELD GLAZING
<input checked="" type="checkbox"/>			i. Electric Brakes	<input checked="" type="checkbox"/>				<input checked="" type="checkbox"/>			Requirements and exceptions as stated pertaining to any crack, discoloration or vision reducing matter (reference 393.60 for exceptions).
<input checked="" type="checkbox"/>			j. Hydraulic Brakes	<input checked="" type="checkbox"/>				<input checked="" type="checkbox"/>			13. WINDSHIELD WIPERS
<input checked="" type="checkbox"/>			k. Vacuum Systems	<input checked="" type="checkbox"/>				<input checked="" type="checkbox"/>			Any power unit that has an inoperative wiper, or missing or damaged parts that render it ineffective.
2. COUPLING DEVICES											
<input checked="" type="checkbox"/>			a. Fifth Wheels	<input checked="" type="checkbox"/>			a. Steering Wheel Free Play	<input checked="" type="checkbox"/>			14. OTHER
<input checked="" type="checkbox"/>			b. Pintle Hooks	<input checked="" type="checkbox"/>			b. Steering Column	<input checked="" type="checkbox"/>			List any other condition(s) which may prevent safe operation of this vehicle.
<input checked="" type="checkbox"/>			c. Drawbar/Towbar Eye	<input checked="" type="checkbox"/>			c. Front Axle Beam and All Steering Components Other Than Steering Column	<input checked="" type="checkbox"/>			<div style="font-size: 1.2em; font-family: cursive;">GOOD CONDITION</div>
<input checked="" type="checkbox"/>			d. Drawbar/Towbar Tongue	<input checked="" type="checkbox"/>			d. Steering Gear Box	<input checked="" type="checkbox"/>			
<input checked="" type="checkbox"/>			e. Safety Devices	<input checked="" type="checkbox"/>			e. Pitman Arm	<input checked="" type="checkbox"/>			
<input checked="" type="checkbox"/>			f. Saddle-Mounts	<input checked="" type="checkbox"/>			f. Power Steering	<input checked="" type="checkbox"/>			
3. EXHAUST SYSTEM											
<input checked="" type="checkbox"/>			a. Exhaust system leaking forward of or directly below the driver/sleeper compartment.	<input checked="" type="checkbox"/>			g. Ball and Socket Joints	<input checked="" type="checkbox"/>			
<input checked="" type="checkbox"/>			b. Bus exhaust system leaking or discharging in violation of standard.	<input checked="" type="checkbox"/>			h. Tie Rods and Drag Links	<input checked="" type="checkbox"/>			
<input checked="" type="checkbox"/>			c. Exhaust system likely to burn, char, or damage the electrical wiring, fuel supply, or any combustible part of the motor vehicle.	<input checked="" type="checkbox"/>			i. Nuts	<input checked="" type="checkbox"/>			
<input checked="" type="checkbox"/>				<input checked="" type="checkbox"/>			j. Steering System	<input checked="" type="checkbox"/>			
4. FUEL SYSTEM											
<input checked="" type="checkbox"/>			a. Visible leak.	<input checked="" type="checkbox"/>			8. SUSPENSION	<input checked="" type="checkbox"/>			
<input checked="" type="checkbox"/>			b. Fuel tank filler cap missing.	<input checked="" type="checkbox"/>			a. Any U-bolt(s), spring hanger(s), or other axle positioning part(s) cracked, broken, loose or missing resulting in shifting of an axle from its normal position.	<input checked="" type="checkbox"/>			
<input checked="" type="checkbox"/>			c. Fuel tank securely attached.	<input checked="" type="checkbox"/>			b. Spring Assembly	<input checked="" type="checkbox"/>			
<input checked="" type="checkbox"/>				<input checked="" type="checkbox"/>			c. Torque, Radius or Tracking Components	<input checked="" type="checkbox"/>			
5. LIGHTING DEVICES											
<input checked="" type="checkbox"/>			All lighting devices and reflectors required by Part 393 shall be operable.	<input checked="" type="checkbox"/>			9. FRAME	<input checked="" type="checkbox"/>			
<input checked="" type="checkbox"/>				<input checked="" type="checkbox"/>			a. Frame Members	<input checked="" type="checkbox"/>			
<input checked="" type="checkbox"/>				<input checked="" type="checkbox"/>			b. Tire and Wheel Clearance	<input checked="" type="checkbox"/>			
<input checked="" type="checkbox"/>				<input checked="" type="checkbox"/>			c. Adjustable Axle Assemblies (Sliding Subframes)	<input checked="" type="checkbox"/>			

INSTRUCTIONS: MARK COLUMN ENTRIES TO VERIFY INSPECTION: ☒ OK, ☒ X NEEDS REPAIR, ☒ NA IF ITEMS DO NOT APPLY, _____ REPAIRED DATE

CERTIFICATION: THIS VEHICLE HAS PASSED ALL THE INSPECTION ITEMS FOR THE ANNUAL VEHICLE INSPECTION IN ACCORDANCE WITH 49 CFR PART 396.

ANNUAL VEHICLE INSPECTION REPORT

VEHICLE HISTORY RECORD

REPORT NUMBER	FLEET UNIT NUMBER
37158433	121
DATE	4/13/16

FOR CARRIER OPERATOR KINGSMAN COACH LINE	INSPECTOR'S NAME (PRINT OR TYPE) J W PARKER
ADDRESS 1570 CEDAR GROVE RD	THIS INSPECTOR MEETS THE QUALIFICATION REQUIREMENTS IN SECTION 396.19. <input checked="" type="checkbox"/> YES
CITY, STATE, ZIP CODE CONLEY, GA 30288	VEHICLE IDENTIFICATION (✓ AND COMPLETE) <input type="checkbox"/> LIC. PLATE NO. <input checked="" type="checkbox"/> VIN <input type="checkbox"/> OTHER 2PCH33491BC711867
VEHICLE TYPE <input type="checkbox"/> TRACTOR <input type="checkbox"/> TRAILER <input type="checkbox"/> TRUCK <input checked="" type="checkbox"/> BUS <input type="checkbox"/> (OTHER)	INSPECTION AGENCY/LOCATION (OPTIONAL) 1554 CEDAR GROVE RD, CONLEY, GA 30288

VEHICLE COMPONENTS INSPECTED

OK	NEEDS REPAIR	REPAIRED DATE	ITEM	OK	NEEDS REPAIR	REPAIRED DATE	ITEM	OK	NEEDS REPAIR	REPAIRED DATE	ITEM
✓			1. BRAKE SYSTEM	✓			6. SAFE LOADING	✓			10. TIRES
✓			a. Service Brakes	✓			a. Part(s) of vehicle or condition of loading such that the spare tire or any part of the load or dunnage can fall onto the roadway.	✓			a. Tires on any steering axle of a power unit.
✓			b. Parking Brake System	✓			b. Protection against shifting cargo.	✓			b. All other tires.
✓			c. Brake Drums or Rotors	✓			c. Container securement devices on intermodal equipment.	✓			11. WHEELS AND RIMS
✓			d. Brake Hose	✓				✓			a. Lock or Side Ring
✓			e. Brake Tubing	✓				✓			b. Wheels and Rims
✓			f. Low Pressure Warning Device	✓				✓			c. Fasteners
✓			g. Tractor Protection Valve	✓				✓			d. Welds
✓			h. Air Compressor	✓				✓			12. WINDSHIELD GLAZING
✓			i. Electric Brakes	✓				✓			Requirements and exceptions as stated pertaining to any crack, discoloration or vision reducing matter (reference 393.60 for exceptions).
✓			j. Hydraulic Brakes	✓				✓			13. WINDSHIELD WIPERS
✓			k. Vacuum Systems	✓				✓			Any power unit that has an inoperative wiper, or missing or damaged parts that render it ineffective.
✓			2. COUPLING DEVICES	✓			7. STEERING MECHANISM	✓			14. OTHER
✓			a. Fifth Wheels	✓			a. Steering Wheel Free Play	✓			List any other condition(s) which may prevent safe operation of this vehicle.
✓			b. Pintle Hooks	✓			b. Steering Column	✓			Good Condition
✓			c. Drawbar/Towbar Eye	✓			c. Front Axle Beam and All Steering Components Other Than Steering Column	✓			
✓			d. Drawbar/Towbar Tongue	✓			d. Steering Gear Box	✓			
✓			e. Safety Devices	✓			e. Pitman Arm	✓			
✓			f. Saddle-Mounts	✓			f. Power Steering	✓			
✓			3. EXHAUST SYSTEM	✓			g. Ball and Socket Joints	✓			
✓			a. Exhaust system leaking forward of or directly below the driver/sleeper compartment.	✓			h. Tie Rods and Drag Links	✓			
✓			b. Bus exhaust system leaking or discharging in violation of standard.	✓			i. Nuts	✓			
✓			c. Exhaust system likely to burn, char, or damage the electrical wiring, fuel supply, or any combustible part of the motor vehicle.	✓			j. Steering System	✓			
✓			4. FUEL SYSTEM	✓			8. SUSPENSION	✓			
✓			a. Visible leak.	✓			a. Any U-bolt(s), spring hanger(s), or other axle positioning part(s) cracked, broken, loose or missing resulting in shifting of an axle from its normal position.	✓			
✓			b. Fuel tank filler cap missing.	✓			b. Spring Assembly	✓			
✓			c. Fuel tank securely attached.	✓			c. Torque, Radius or Tracking Components	✓			
✓			5. LIGHTING DEVICES	✓			9. FRAME	✓			
✓			All lighting devices and reflectors required by Part 393 shall be operable.	✓			a. Frame Members	✓			
				✓			b. Tire and Wheel Clearance	✓			
				✓			c. Adjustable Axle Assemblies (Sliding Subframes)	✓			

INSTRUCTIONS: MARK COLUMN ENTRIES TO VERIFY INSPECTION: ✓ OK, ✗ NEEDS REPAIR, NA IF ITEMS DO NOT APPLY, _____ REPAIRED DATE

CERTIFICATION: THIS VEHICLE HAS PASSED ALL THE INSPECTION ITEMS FOR THE ANNUAL VEHICLE INSPECTION IN ACCORDANCE WITH 49 CFR PART 396.

ANNUAL VEHICLE INSPECTION REPORT

VEHICLE HISTORY RECORD	
REPORT NUMBER	FLEET UNIT NUMBER
37191085	128
DATE 4/13/16	

OR CARRIER OPERATOR <i>King's Miami Coach Line</i>	INSPECTOR'S NAME (PRINT OR TYPE) <i>JW PARKER</i>
ADDRESS <i>1570 CEDAR GROVE RD</i>	THIS INSPECTOR MEETS THE QUALIFICATION REQUIREMENTS IN SECTION 396.19. <input checked="" type="checkbox"/> YES
CITY, STATE, ZIP CODE <i>Conley, GA 30288</i>	VEHICLE IDENTIFICATION (✓ AND COMPLETE) <input type="checkbox"/> LIC. PLATE NO. <input checked="" type="checkbox"/> VIN <input type="checkbox"/> OTHER <i>2M63JMSA2FW067201</i>
VEHICLE TYPE <input type="checkbox"/> TRACTOR <input type="checkbox"/> TRAILER <input type="checkbox"/> TRUCK <input checked="" type="checkbox"/> BUS <input type="checkbox"/> (OTHER)	INSPECTION AGENCY/LOCATION (OPTIONAL) <i>1554 CEDAR GROVE, RD, CONLEY, GA 30288</i>

VEHICLE COMPONENTS INSPECTED											
OK	NEEDS REPAIR	REPAIRED DATE	ITEM	OK	NEEDS REPAIR	REPAIRED DATE	ITEM	OK	NEEDS REPAIR	REPAIRED DATE	ITEM
<input checked="" type="checkbox"/>			1. BRAKE SYSTEM	<input checked="" type="checkbox"/>			6. SAFE LOADING	<input checked="" type="checkbox"/>			10. TIRES
<input checked="" type="checkbox"/>			a. Service Brakes	<input checked="" type="checkbox"/>			a. Part(s) of vehicle or condition of loading such that the spare tire or any part of the load or dunnage can fall onto the roadway.	<input checked="" type="checkbox"/>			a. Tires on any steering axle of a power unit.
<input checked="" type="checkbox"/>			b. Parking Brake System	<input checked="" type="checkbox"/>			b. Protection against shifting cargo.	<input checked="" type="checkbox"/>			b. All other tires.
<input checked="" type="checkbox"/>			c. Brake Drums or Rotors	<input checked="" type="checkbox"/>			c. Container securement devices on intermodal equipment.	<input checked="" type="checkbox"/>			11. WHEELS AND RIMS
<input checked="" type="checkbox"/>			d. Brake Hose	<input checked="" type="checkbox"/>			a. Steering Wheel Free Play	<input checked="" type="checkbox"/>			a. Lock or Side Ring
<input checked="" type="checkbox"/>			e. Brake Tubing	<input checked="" type="checkbox"/>			b. Steering Column	<input checked="" type="checkbox"/>			b. Wheels and Rims
<input checked="" type="checkbox"/>			f. Low Pressure Warning Device	<input checked="" type="checkbox"/>			c. Front Axle Beam and All Steering Components Other Than Steering Column	<input checked="" type="checkbox"/>			c. Fasteners
<input checked="" type="checkbox"/>			g. Tractor Protection Valve	<input checked="" type="checkbox"/>			d. Steering Gear Box	<input checked="" type="checkbox"/>			d. Welds
<input checked="" type="checkbox"/>			h. Air Compressor	<input checked="" type="checkbox"/>			e. Pitman Arm	<input checked="" type="checkbox"/>			12. WINDSHIELD GLAZING
<input checked="" type="checkbox"/>			i. Electric Brakes	<input checked="" type="checkbox"/>			f. Power Steering	<input checked="" type="checkbox"/>			Requirements and exceptions as stated pertaining to any crack, discoloration or vision reducing matter (reference 393.60 for exceptions).
<input checked="" type="checkbox"/>			j. Hydraulic Brakes	<input checked="" type="checkbox"/>			g. Ball and Socket Joints	<input checked="" type="checkbox"/>			13. WINDSHIELD WIPERS
<input checked="" type="checkbox"/>			k. Vacuum Systems	<input checked="" type="checkbox"/>			h. Tie Rods and Drag Links	<input checked="" type="checkbox"/>			Any power unit that has an inoperative wiper, or missing or damaged parts that render it ineffective.
<input checked="" type="checkbox"/>			2. COUPLING DEVICES	<input checked="" type="checkbox"/>			i. Nuts	<input checked="" type="checkbox"/>			14. OTHER
<input checked="" type="checkbox"/>			a. Fifth Wheels	<input checked="" type="checkbox"/>			j. Steering System	<input checked="" type="checkbox"/>			List any other condition(s) which may prevent safe operation of this vehicle.
<input checked="" type="checkbox"/>			b. Pintle Hooks	<input checked="" type="checkbox"/>			8. SUSPENSION	<input checked="" type="checkbox"/>			<i>Good operation condition.</i>
<input checked="" type="checkbox"/>			c. Drawbar/Towbar Eye	<input checked="" type="checkbox"/>			a. Any U-bolt(s), spring hanger(s), or other axle positioning part(s) cracked, broken, loose or missing resulting in shifting of an axle from its normal position.	<input checked="" type="checkbox"/>			
<input checked="" type="checkbox"/>			d. Drawbar/Towbar Tongue	<input checked="" type="checkbox"/>			b. Spring Assembly	<input checked="" type="checkbox"/>			
<input checked="" type="checkbox"/>			e. Safety Devices	<input checked="" type="checkbox"/>			c. Torque, Radius or Tracking Components	<input checked="" type="checkbox"/>			
<input checked="" type="checkbox"/>			f. Saddle-Mounts	<input checked="" type="checkbox"/>			9. FRAME	<input checked="" type="checkbox"/>			
<input checked="" type="checkbox"/>			3. EXHAUST SYSTEM	<input checked="" type="checkbox"/>			a. Frame Members	<input checked="" type="checkbox"/>			
<input checked="" type="checkbox"/>			a. Exhaust system leaking forward of or directly below the driver/sleeper compartment.	<input checked="" type="checkbox"/>			b. Tire and Wheel Clearance	<input checked="" type="checkbox"/>			
<input checked="" type="checkbox"/>			b. Bus exhaust system leaking or discharging in violation of standard.	<input checked="" type="checkbox"/>			c. Adjustable Axle Assemblies (Sliding Subframes)	<input checked="" type="checkbox"/>			
<input checked="" type="checkbox"/>			c. Exhaust system likely to burn, char, or damage the electrical wiring, fuel supply, or any combustible part of the motor vehicle.	<input checked="" type="checkbox"/>				<input checked="" type="checkbox"/>			
<input checked="" type="checkbox"/>			4. FUEL SYSTEM	<input checked="" type="checkbox"/>				<input checked="" type="checkbox"/>			
<input checked="" type="checkbox"/>			a. Visible leak.	<input checked="" type="checkbox"/>				<input checked="" type="checkbox"/>			
<input checked="" type="checkbox"/>			b. Fuel tank filler cap missing.	<input checked="" type="checkbox"/>				<input checked="" type="checkbox"/>			
<input checked="" type="checkbox"/>			c. Fuel tank securely attached.	<input checked="" type="checkbox"/>				<input checked="" type="checkbox"/>			
<input checked="" type="checkbox"/>			5. LIGHTING DEVICES	<input checked="" type="checkbox"/>				<input checked="" type="checkbox"/>			
<input checked="" type="checkbox"/>			All lighting devices and reflectors required by Part 393 shall be operable.	<input checked="" type="checkbox"/>				<input checked="" type="checkbox"/>			

INSTRUCTIONS: MARK COLUMN ENTRIES TO VERIFY INSPECTION: ☒ OK, ☒ NEEDS REPAIR, ☒ NA IF ITEMS DO NOT APPLY, _____ REPAIRED DATE

CERTIFICATION: THIS VEHICLE HAS PASSED ALL THE INSPECTION ITEMS FOR THE ANNUAL VEHICLE INSPECTION IN ACCORDANCE WITH 49 CFR PART 396.

ANNUAL VEHICLE INSPECTION REPORT

VEHICLE HISTORY RECORD

REPORT NUMBER	FLEET UNIT NUMBER
37190886	123
DATE 4/13/16	

FOR CARRIER OPERATOR KINGSMAAN COACH LINE	INSPECTOR'S NAME (PRINT OR TYPE) J W PARKER
ADDRESS 1570 CEDAR GROVE RD	THIS INSPECTOR MEETS THE QUALIFICATION REQUIREMENTS IN SECTION 396.19. <input checked="" type="checkbox"/> YES
CITY, STATE, ZIP CODE CONLEY, GA 30288	VEHICLE IDENTIFICATION (✓ AND COMPLETE) <input type="checkbox"/> LIC. PLATE NO. <input checked="" type="checkbox"/> VIN <input type="checkbox"/> OTHER 2M G3JM 8A0DWO 66310
VEHICLE TYPE <input type="checkbox"/> TRACTOR <input type="checkbox"/> TRAILER <input type="checkbox"/> TRUCK <input type="checkbox"/> BUS <input type="checkbox"/> (OTHER)	INSPECTION AGENCY/LOCATION (OPTIONAL) 1554 CEDAR GROVE RD, CONLEY, GA, 30288

VEHICLE COMPONENTS INSPECTED

OK	NEEDS REPAIR	REPAIRED DATE	ITEM	OK	NEEDS REPAIR	REPAIRED DATE	ITEM	OK	NEEDS REPAIR	REPAIRED DATE	ITEM
			1. BRAKE SYSTEM				6. SAFE LOADING				10. TIRES
✓			a. Service Brakes	✓			a. Part(s) of vehicle or condition of loading such that the spare tire or any part of the load or dunnage can fall onto the roadway.	✓			a. Tires on any steering axle of a power unit.
✓			b. Parking Brake System	✓			b. Protection against shifting cargo.	✓			b. All other tires.
✓			c. Brake Drums or Rotors	✓			c. Container securement devices on intermodal equipment.	✓			11. WHEELS AND RIMS
✓			d. Brake Hose	✓				✓			a. Lock or Side Ring
✓			e. Brake Tubing	✓				✓			b. Wheels and Rims
✓			f. Low Pressure Warning Device	✓				✓			c. Fasteners
NA			g. Tractor Protection Valve	✓				✓			d. Welds
NA			h. Air Compressor	✓				✓			12. WINDSHIELD GLAZING
NA			i. Electric Brakes	✓				✓			Requirements and exceptions as stated pertaining to any crack, discoloration or vision reducing matter (reference 393.60 for exceptions).
NA			j. Hydraulic Brakes	✓				✓			13. WINDSHIELD WIPERS
NA			k. Vacuum Systems	✓				✓			Any power unit that has an inoperative wiper, or missing or damaged parts that render it ineffective.
			2. COUPLING DEVICES				7. STEERING MECHANISM				14. OTHER
✓			a. Fifth Wheels	✓			a. Steering Wheel Free Play	✓			List any other condition(s) which may prevent safe operation of this vehicle.
✓			b. Pintle Hooks	✓			b. Steering Column	✓			Good operation condition
✓			c. Drawbar/Towbar Eye	✓			c. Front Axle Beam and All Steering Components Other Than Steering Column	✓			
✓			d. Drawbar/Towbar Tongue	✓			d. Steering Gear Box	✓			
✓			e. Safety Devices	✓			e. Pitman Arm	✓			
✓			f. Saddle-Mounts	✓			f. Power Steering	✓			
			3. EXHAUST SYSTEM				8. SUSPENSION				
✓			a. Exhaust system leaking forward of or directly below the driver/sleeper compartment.	✓			a. Any U-bolt(s), spring hanger(s), or other axle positioning part(s) cracked, broken, loose or missing resulting in shifting of an axle from its normal position.	✓			
✓			b. Bus exhaust system leaking or discharging in violation of standard.	✓			b. Spring Assembly	✓			
✓			c. Exhaust system likely to burn, char, or damage the electrical wiring, fuel supply, or any combustible part of the motor vehicle.	✓			c. Torque, Radius or Tracking Components	✓			
			4. FUEL SYSTEM				9. FRAME				
✓			a. Visible leak.	✓			a. Frame Members	✓			
✓			b. Fuel tank filler cap missing.	✓			b. Tire and Wheel Clearance	✓			
✓			c. Fuel tank securely attached.	✓			c. Adjustable Axle Assemblies (Sliding Subframes)	✓			
			5. LIGHTING DEVICES								
✓			All lighting devices and reflectors required by Part 393 shall be operable.	✓							

INSTRUCTIONS: MARK COLUMN ENTRIES TO VERIFY INSPECTION: ✓ OK, X NEEDS REPAIR, NA IF ITEMS DO NOT APPLY, REPAIRED DATE

CERTIFICATION: THIS VEHICLE HAS PASSED ALL THE INSPECTION ITEMS FOR THE ANNUAL VEHICLE INSPECTION IN ACCORDANCE WITH 49 CFR PART 396.

ANNUAL VEHICLE INSPECTION REPORT

VEHICLE HISTORY RECORD	
REPORT NUMBER	FLEET UNIT NUMBER
37191084	124
DATE 4/23/16	

CARRIER OPERATOR <i>KINGS MAILS COACH LINE</i>	INSPECTOR'S NAME (PRINT OR TYPE) <i>JW PARKER</i>
ADDRESS <i>1570 CEDAR GROVES</i>	THIS INSPECTOR MEETS THE QUALIFICATION REQUIREMENTS IN SECTION 396.19. <input checked="" type="checkbox"/> YES
CITY, STATE, ZIP CODE <i>CONLEY, GA 30288</i>	VEHICLE IDENTIFICATION (✓ AND COMPLETE) <input type="checkbox"/> LIC. PLATE NO. <input type="checkbox"/> VIN <input type="checkbox"/> OTHER <i>YE2YC11BXE2041141</i>
VEHICLE TYPE <input type="checkbox"/> TRACTOR <input type="checkbox"/> TRAILER <input type="checkbox"/> TRUCK <input checked="" type="checkbox"/> BUS <input type="checkbox"/> (OTHER)	INSPECTION AGENCY/LOCATION (OPTIONAL) <i>1554 CEDAR GROVE RD, GA, CONLEY, 30288</i>

VEHICLE COMPONENTS INSPECTED			
OK	NEEDS REPAIR	REPAIRED DATE	ITEM
<input checked="" type="checkbox"/>			1. BRAKE SYSTEM
<input checked="" type="checkbox"/>			a. Service Brakes
<input checked="" type="checkbox"/>			b. Parking Brake System
<input checked="" type="checkbox"/>			c. Brake Drums or Rotors
<input checked="" type="checkbox"/>			d. Brake Hose
<input checked="" type="checkbox"/>			e. Brake Tubing
<input checked="" type="checkbox"/>			f. Low Pressure Warning Device
<i>NA</i>			g. Tractor Protection Valve
<i>NA</i>			h. Air Compressor
<i>NA</i>			i. Electric Brakes
<i>NA</i>			j. Hydraulic Brakes
<i>NA</i>			k. Vacuum Systems
<input checked="" type="checkbox"/>			2. COUPLING DEVICES
<i>NA</i>			a. Fifth Wheels
<i>NA</i>			b. Pintle Hooks
<i>NA</i>			c. Drawbar/Towbar Eye
<i>NA</i>			d. Drawbar/Towbar Tongue
<i>NA</i>			e. Safety Devices
<i>NA</i>			f. Saddle-Mounts
<input checked="" type="checkbox"/>			3. EXHAUST SYSTEM
<input checked="" type="checkbox"/>			a. Exhaust system leaking forward of or directly below the driver/sleeper compartment.
<input checked="" type="checkbox"/>			b. Bus exhaust system leaking or discharging in violation of standard.
<input checked="" type="checkbox"/>			c. Exhaust system likely to burn, char, or damage the electrical wiring, fuel supply, or any combustible part of the motor vehicle.
<input checked="" type="checkbox"/>			4. FUEL SYSTEM
<input checked="" type="checkbox"/>			a. Visible leak.
<input checked="" type="checkbox"/>			b. Fuel tank filler cap missing.
<input checked="" type="checkbox"/>			c. Fuel tank securely attached.
<input checked="" type="checkbox"/>			5. LIGHTING DEVICES
<input checked="" type="checkbox"/>			All lighting devices and reflectors required by Part 393 shall be operable.
<input checked="" type="checkbox"/>			6. SAFE LOADING
<input checked="" type="checkbox"/>			a. Part(s) of vehicle or condition of loading such that the spare tire or any part of the load or dunnage can fall onto the roadway.
<input checked="" type="checkbox"/>			b. Protection against shifting cargo.
<input checked="" type="checkbox"/>			c. Container securement devices on intermodal equipment.
<input checked="" type="checkbox"/>			7. STEERING MECHANISM
<input checked="" type="checkbox"/>			a. Steering Wheel Free Play
<input checked="" type="checkbox"/>			b. Steering Column
<input checked="" type="checkbox"/>			c. Front Axle Beam and All Steering Components Other Than Steering Column
<input checked="" type="checkbox"/>			d. Steering Gear Box
<input checked="" type="checkbox"/>			e. Pitman Arm
<input checked="" type="checkbox"/>			f. Power Steering
<input checked="" type="checkbox"/>			g. Ball and Socket Joints
<input checked="" type="checkbox"/>			h. Tie Rods and Drag Links
<input checked="" type="checkbox"/>			i. Nuts
<input checked="" type="checkbox"/>			j. Steering System
<input checked="" type="checkbox"/>			8. SUSPENSION
<input checked="" type="checkbox"/>			a. Any U-bolt(s), spring hanger(s), or other axle positioning part(s) cracked, broken, loose or missing resulting in shifting of an axle from its normal position.
<input checked="" type="checkbox"/>			b. Spring Assembly
<input checked="" type="checkbox"/>			c. Torque, Radius or Tracking Components
<input checked="" type="checkbox"/>			9. FRAME
<input checked="" type="checkbox"/>			a. Frame Members
<input checked="" type="checkbox"/>			b. Tire and Wheel Clearance
<input checked="" type="checkbox"/>			c. Adjustable Axle Assemblies (Sliding Subframes)
<input checked="" type="checkbox"/>			10. TIRES
<input checked="" type="checkbox"/>			a. Tires on any steering axle of a power unit.
<input checked="" type="checkbox"/>			b. All other tires.
<input checked="" type="checkbox"/>			11. WHEELS AND RIMS
<input checked="" type="checkbox"/>			a. Lock or Side Ring
<input checked="" type="checkbox"/>			b. Wheels and Rims
<input checked="" type="checkbox"/>			c. Fasteners
<input checked="" type="checkbox"/>			d. Welds
<input checked="" type="checkbox"/>			12. WINDSHIELD GLAZING
<input checked="" type="checkbox"/>			Requirements and exceptions as stated pertaining to any crack, discoloration or vision reducing matter (reference 393.60 for exceptions).
<input checked="" type="checkbox"/>			13. WINDSHIELD WIPERS
<input checked="" type="checkbox"/>			Any power unit that has an inoperative wiper, or missing or damaged parts that render it ineffective.
<input checked="" type="checkbox"/>			14. OTHER
<input checked="" type="checkbox"/>			List any other condition(s) which may prevent safe operation of this vehicle. <i>Good operation</i> <i>conditional</i>

INSTRUCTIONS: MARK COLUMN ENTRIES TO VERIFY INSPECTION: ☒ OK, ☒ NEEDS REPAIR, ☒ NA IF ITEMS DO NOT APPLY, REPAIRED DATE

CERTIFICATION: THIS VEHICLE HAS PASSED ALL THE INSPECTION ITEMS FOR THE ANNUAL VEHICLE INSPECTION IN ACCORDANCE WITH 49 CFR PART 396.

ANNUAL VEHICLE INSPECTION REPORT

VEHICLE HISTORY RECORD

REPORT
NUMBER

FLEET UNIT NUMBER

36320227

125

DATE

2/23/16

FOR CARRIER OPERATOR

INSPECTOR'S NAME (PRINT OR TYPE)

KIXIGSTIAN'S

JW PARKER

ADDRESS

THIS INSPECTOR MEETS THE QUALIFICATION REQUIREMENTS IN SECTION 396.19.

1570 CEDAR GROVE RD

☒ YES

CITY, STATE, ZIP CODE

CONLEY, GA 30288

VEHICLE IDENTIFICATION (✓ AND COMPLETE) ☐ LIC. PLATE NO. ☒ VIN ☐ OTHER

YF2YC11B7F2641308

VEHICLE TYPE ☐ TRACTOR ☐ TRAILER ☐ TRUCK ☒ BUS

INSPECTION AGENCY/LOCATION (OPTIONAL)

☐ (OTHER)

1554 CEDAR GROVE RD, CONLEY, GA, 30288

VEHICLE COMPONENTS INSPECTED

OK	NEEDS REPAIR	REPAIRED DATE	ITEM	OK	NEEDS REPAIR	REPAIRED DATE	ITEM	OK	NEEDS REPAIR	REPAIRED DATE	ITEM
			1. BRAKE SYSTEM				6. SAFE LOADING				10. TIRES
✓			a. Service Brakes				a. Part(s) of vehicle or condition of loading such that the spare tire or any part of the load or dunnage can fall onto the roadway.	✓			a. Tires on any steering axle of a power unit.
✓			b. Parking Brake System	✓			b. Protection against shifting cargo.	✓			b. All other tires.
✓			c. Brake Drums or Rotors				c. Container securement devices on intermodal equipment.				
✓			d. Brake Hose					✓			11. WHEELS AND RIMS
✓			e. Brake Tubing					✓			a. Lock or Side Ring
✓			f. Low Pressure Warning Device	✓				✓			b. Wheels and Rims
✓			g. Tractor Protection Valve					✓			c. Fasteners
N/A			h. Air Compressor	✓				✓			d. Welds
N/A			i. Electric Brakes				7. STEERING MECHANISM	✓			12. WINDSHIELD GLAZING
N/A			j. Hydraulic Brakes				a. Steering Wheel Free Play				Requirements and exceptions as stated pertaining to any crack, discoloration or vision reducing matter (reference 393.60 for exceptions).
N/A			k. Vacuum Systems	✓			b. Steering Column				
			2. COUPLING DEVICES	✓			c. Front Axle Beam and All Steering Components Other Than Steering Column				13. WINDSHIELD WIPERS
N/A			a. Fifth Wheels	✓			d. Steering Gear Box	✓			Any power unit that has an inoperative wiper, or missing or damaged parts that render it ineffective.
N/A			b. Pintle Hooks				e. Pitman Arm				
N/A			c. Drawbar/Towbar Eye	✓			f. Power Steering				14. OTHER
N/A			d. Drawbar/Towbar Tongue	✓			g. Ball and Socket Joints				List any other condition(s) which may prevent safe operation of this vehicle.
N/A			e. Safety Devices	✓			h. Tie Rods and Drag Links				Good operation
N/A			f. Saddle-Mounts	✓			i. Nuts				Conditions
			3. EXHAUST SYSTEM	✓			j. Steering System				
✓			a. Exhaust system leaking forward of or directly below the driver/sleeper compartment.	N/A							
✓			b. Bus exhaust system leaking or discharging in violation of standard.	✓			8. SUSPENSION				
✓			c. Exhaust system likely to burn, char, or damage the electrical wiring, fuel supply, or any combustible part of the motor vehicle.	✓			a. Any U-bolt(s), spring hanger(s), or other axle positioning part(s) cracked, broken, loose or missing resulting in shifting of an axle from its normal position.				
			4. FUEL SYSTEM	✓			b. Spring Assembly				
✓			a. Visible leak.	✓			c. Torque, Radius or Tracking Components				
✓			b. Fuel tank filler cap missing.	✓							
✓			c. Fuel tank securely attached.	✓			9. FRAME				
			5. LIGHTING DEVICES	✓			a. Frame Members				
✓			All lighting devices and reflectors required by Part 393 shall be operable.	✓			b. Tire and Wheel Clearance				
				✓			c. Adjustable Axle Assemblies (Sliding Subframes)				

INSTRUCTIONS: MARK COLUMN ENTRIES TO VERIFY INSPECTION: ✓ OK, X NEEDS REPAIR, NA IF ITEMS DO NOT APPLY, REPAIRED DATE

CERTIFICATION: THIS VEHICLE HAS PASSED ALL THE INSPECTION ITEMS FOR THE ANNUAL VEHICLE INSPECTION IN ACCORDANCE WITH 49 CFR PART 396.

ANNUAL VEHICLE INSPECTION REPORT

VEHICLE HISTORY RECORD

REPORT
NUMBER

FLEET UNIT NUMBER

36320229 # 126

DATE 2/17/2016

OR CARRIER OPERATOR

INSPECTOR'S NAME (PRINT OR TYPE)

ADDRESS

THIS INSPECTOR MEETS THE QUALIFICATION REQUIREMENTS IN SECTION 396.19.

CITY, STATE, ZIP CODE

VEHICLE IDENTIFICATION (✓ AND COMPLETE) ☐ LIC. PLATE NO. ☒ VIN ☐ OTHERVEHICLE TYPE ☐ TRACTOR ☐ TRAILER ☐ TRUCK ☒ BUS

INSPECTION AGENCY/LOCATION (OPTIONAL)

☐ (OTHER)

VEHICLE COMPONENTS INSPECTED

OK	NEEDS REPAIR	REPAIRED DATE	ITEM	OK	NEEDS REPAIR	REPAIRED DATE	ITEM	OK	NEEDS REPAIR	REPAIRED DATE	ITEM
			1. BRAKE SYSTEM				6. SAFE LOADING				10. TIRES
✓			a. Service Brakes				a. Part(s) of vehicle or condition of loading such that the spare tire or any part of the load or dunnage can fall onto the roadway.	✓			a. Tires on any steering axle of a power unit.
✓			b. Parking Brake System				b. Protection against shifting cargo.	✓			b. All other tires.
✓			c. Brake Drums or Rotors	✓			c. Container securement devices on intermodal equipment.	✓			11. WHEELS AND RIMS
✓			d. Brake Hose	✓				✓			a. Lock or Side Ring
✓			e. Brake Tubing	✓				✓			b. Wheels and Rims
✓			f. Low Pressure Warning Device	✓				✓			c. Fasteners
✓			g. Tractor Protection Valve	✓				✓			d. Welds
✓			h. Air Compressor	✓				✓			12. WINDSHIELD GLAZING
✓			i. Electric Brakes	✓				✓			Requirements and exceptions as stated pertaining to any crack, discoloration or vision reducing matter (reference 393.60 for exceptions).
✓			j. Hydraulic Brakes	✓				✓			13. WINDSHIELD WIPERS
✓			k. Vacuum Systems	✓				✓			Any power unit that has an inoperative wiper, or missing or damaged parts that render it ineffective.
			2. COUPLING DEVICES				7. STEERING MECHANISM				14. OTHER
✓			a. Fifth Wheels	✓			a. Steering Wheel Free Play				List any other condition(s) which may prevent safe operation of this vehicle.
✓			b. Pintle Hooks	✓			b. Steering Column				Good condition
✓			c. Drawbar/Towbar Eye	✓			c. Front Axle Beam and All Steering Components Other Than Steering Column				
✓			d. Drawbar/Towbar Tongue	✓			d. Steering Gear Box				
✓			e. Safety Devices	✓			e. Pitman Arm				
✓			f. Saddle-Mounts	✓			f. Power Steering				
			3. EXHAUST SYSTEM				8. SUSPENSION				
✓			a. Exhaust system leaking forward of or directly below the driver/sleeper compartment.	✓			a. Any U-bolt(s), spring hanger(s), or other axle positioning part(s) cracked, broken, loose or missing resulting in shifting of an axle from its normal position.				
✓			b. Bus exhaust system leaking or discharging in violation of standard.	✓			b. Spring Assembly				
✓			c. Exhaust system likely to burn, char, or damage the electrical wiring, fuel supply, or any combustible part of the motor vehicle.	✓			c. Torque, Radius or Tracking Components				
			4. FUEL SYSTEM				9. FRAME				
✓			a. Visible leak.	✓			a. Frame Members				
✓			b. Fuel tank filler cap missing.	✓			b. Tire and Wheel Clearance				
✓			c. Fuel tank securely attached.	✓			c. Adjustable Axle Assemblies (Sliding Subframes)				
			5. LIGHTING DEVICES								
✓			All lighting devices and reflectors required by Part 393 shall be operable.	✓							

INSTRUCTIONS: MARK COLUMN ENTRIES TO VERIFY INSPECTION: ✓ OK, X NEEDS REPAIR, NA IF ITEMS DO NOT APPLY. REPAIRED DATE

CERTIFICATION: THIS VEHICLE HAS PASSED ALL THE INSPECTION ITEMS FOR THE ANNUAL VEHICLE INSPECTION IN ACCORDANCE WITH 49 CFR PART 396.

BREAKDOWN ASSISTANCE



Kingsmen Coach Lines

Mailing Address P. O. Box 661
Conley, Georgia 39288-0661
(404) 362-9339 – Fax (404) 362-0254
www.kingsmencoachlines.com

ROADSIDE EMERGENCIES and BREAKDOWN ASSISTANCE

For breakdown assistance Kingsmen Coach Lines, LLC is affiliated with numerous nationwide companies, mechanic shops all over the USA and Canada.

Listed below are some of those companies.

1. Cline Tours, Inc.
2. Graylines of Nashville
3. Colonial Trailways, Inc.
4. Arrow Coach Lines
5. Goodyear Tire
6. MCI, Prevost, and Vanhool Repair Shops

STATE OF ALABAMA

DISCLOSURE STATEMENT



State of Alabama Disclosure Statement

(Required by Act 2001-955)

ENTITY COMPLETING FORM

KINGSMEN COACH LINES, LLC

ADDRESS

P.O. BOX 661 / 1570 CEDAR GROVE RD

CITY, STATE, ZIP

CONLEY, GA 30288-0661

TELEPHONE NUMBER

(404) 362-9339

STATE AGENCY/DEPARTMENT THAT WILL RECEIVE GOODS, SERVICES, OR IS RESPONSIBLE FOR GRANT AWARD

ADDRESS

CITY, STATE, ZIP

TELEPHONE NUMBER

()

This form is provided with:

☐

Contract

☐

Proposal

☐

Request for Proposal

☒

Invitation to Bid

☐

Grant Proposal

Have you or any of your partners, divisions, or any related business units previously performed work or provided goods to any State Agency/Department in the current or last fiscal year?

☒

Yes

☐

No

If yes, identify below the State Agency/Department that received the goods or services, the type(s) of goods or services previously provided, and the amount received for the provision of such goods or services.

STATE AGENCY/DEPARTMENT	TYPE OF GOODS/SERVICES	AMOUNT RECEIVED
ALA. AEM BAND	TRANSPORTATION	36,000.00 plus

Have you or any of your partners, divisions, or any related business units previously applied and received any grants from any State Agency/Department in the current or last fiscal year?

☐

Yes

☒

No

If yes, identify the State Agency/Department that awarded the grant, the date such grant was awarded, and the amount of the grant.

STATE AGENCY/DEPARTMENT	DATE GRANT AWARDED	AMOUNT OF GRANT
-------------------------	--------------------	-----------------

1. List below the name(s) and address(es) of all public officials/public employees with whom you, members of your immediate family, or any of your employees have a family relationship and who may directly personally benefit financially from the proposed transaction. Identify the State Department/Agency for which the public officials/public employees work. (Attach additional sheets if necessary.)

NAME OF PUBLIC OFFICIAL/EMPLOYEE	ADDRESS	STATE DEPARTMENT/AGENCY
----------------------------------	---------	-------------------------

OVER

2. List below the name(s) and address(es) of all family members of public officials/public employees with whom you, members of your immediate family, or any of your employees have a family relationship and who may directly personally benefit financially from the proposed transaction. Identify the public officials/public employees and State Department/Agency for which the public officials/public employees work. (Attach additional sheets if necessary.)

NAME OF FAMILY MEMBER	ADDRESS	NAME OF PUBLIC OFFICIAL/ PUBLIC EMPLOYEE	STATE DEPARTMENT/ AGENCY WHERE EMPLOYED

If you identified individuals in items one and/or two above, describe in detail below the direct financial benefit to be gained by the public officials, public employees, and/or their family members as the result of the contract, proposal, request for proposal, invitation to bid, or grant proposal. (Attach additional sheets if necessary.)

Describe in detail below any indirect financial benefits to be gained by any public official, public employee, and/or family members of the public official or public employee as the result of the contract, proposal, request for proposal, invitation to bid, or grant proposal. (Attach additional sheets if necessary.)

List below the name(s) and address(es) of all paid consultants and/or lobbyists utilized to obtain the contract, proposal, request for proposal, invitation to bid, or grant proposal:

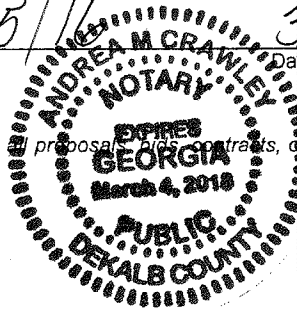
NAME OF PAID CONSULTANT/LOBBYIST	ADDRESS

By signing below, I certify under oath and penalty of perjury that all statements on or attached to this form are true and correct to the best of my knowledge. I further understand that a civil penalty of ten percent (10%) of the amount of the transaction, not to exceed \$10,000.00, is applied for knowingly providing incorrect or misleading information.

Signature [Signature] Date 7/5/16

Notary's Signature [Signature] Date 7/5/16 3/4/2018 Date Notary Expires

Act 2001-955 requires the disclosure statement to be completed and filed with all proposals, bids, contracts, or grant proposals to the State of Alabama in excess of \$5,000.



THANK YOU
KINGSMEN COACH LINES, LLC.



THE E-VERIFY MEMORANDUM OF UNDERSTANDING FOR EMPLOYERS

ARTICLE I PURPOSE AND AUTHORITY

The parties to this agreement are the Department of Homeland Security (DHS) and the Kingsmen Coach Lines, LLC (Employer). The purpose of this agreement is to set forth terms and conditions which the Employer will follow while participating in E-Verify.

E-Verify is a program that electronically confirms an employee's eligibility to work in the United States after completion of Form I-9, Employment Eligibility Verification (Form I-9). This Memorandum of Understanding (MOU) explains certain features of the E-Verify program and describes specific responsibilities of the Employer, the Social Security Administration (SSA), and DHS.

Authority for the E-Verify program is found in Title IV, Subtitle A, of the Illegal Immigration Reform and Immigrant Responsibility Act of 1996 (IIRIRA), Pub. L. 104-208, 110 Stat. 3009, as amended (8 U.S.C. § 1324a note). The Federal Acquisition Regulation (FAR) Subpart 22.18, "Employment Eligibility Verification" and Executive Order 12989, as amended, provide authority for Federal contractors and subcontractors (Federal contractor) to use E-Verify to verify the employment eligibility of certain employees working on Federal contracts.

ARTICLE II RESPONSIBILITIES

A. RESPONSIBILITIES OF THE EMPLOYER

1. The Employer agrees to display the following notices supplied by DHS in a prominent place that is clearly visible to prospective employees and all employees who are to be verified through the system:
 - a. Notice of E-Verify Participation
 - b. Notice of Right to Work
2. The Employer agrees to provide to the SSA and DHS the names, titles, addresses, and telephone numbers of the Employer representatives to be contacted about E-Verify. The Employer also agrees to keep such information current by providing updated information to SSA and DHS whenever the representatives' contact information changes.
3. The Employer agrees to grant E-Verify access only to current employees who need E-Verify access. Employers must promptly terminate an employee's E-Verify access if the employer is separated from the company or no longer needs access to E-Verify.

Company ID Number: 1117197

4. The Employer agrees to become familiar with and comply with the most recent version of the E-Verify User Manual.
 5. The Employer agrees that any Employer Representative who will create E-Verify cases will complete the E-Verify Tutorial before that individual creates any cases.
 - a. The Employer agrees that all Employer representatives will take the refresher tutorials when prompted by E-Verify in order to continue using E-Verify. Failure to complete a refresher tutorial will prevent the Employer Representative from continued use of E-Verify.
 6. The Employer agrees to comply with current Form I-9 procedures, with two exceptions:
 - a. If an employee presents a "List B" identity document, the Employer agrees to only accept "List B" documents that contain a photo. (List B documents identified in 8 C.F.R. § 274a.2(b)(1)(B)) can be presented during the Form I-9 process to establish identity.) If an employee objects to the photo requirement for religious reasons, the Employer should contact E-Verify at 888-464-4218.
 - b. If an employee presents a DHS Form I-551 (Permanent Resident Card), Form I-766 (Employment Authorization Document), or U.S. Passport or Passport Card to complete Form I-9, the Employer agrees to make a photocopy of the document and to retain the photocopy with the employee's Form I-9. The Employer will use the photocopy to verify the photo and to assist DHS with its review of photo mismatches that employees contest. DHS may in the future designate other documents that activate the photo screening tool.
- Note: Subject only to the exceptions noted previously in this paragraph, employees still retain the right to present any List A, or List B and List C, document(s) to complete the Form I-9.
7. The Employer agrees to record the case verification number on the employee's Form I-9 or to print the screen containing the case verification number and attach it to the employee's Form I-9.
 8. The Employer agrees that, although it participates in E-Verify, the Employer has a responsibility to complete, retain, and make available for inspection Forms I-9 that relate to its employees, or from other requirements of applicable regulations or laws, including the obligation to comply with the antidiscrimination requirements of section 274B of the INA with respect to Form I-9 procedures.
 - a. The following modified requirements are the only exceptions to an Employer's obligation to not employ unauthorized workers and comply with the anti-discrimination provision of the INA: (1) List B identity documents must have photos, as described in paragraph 6 above; (2) When an Employer confirms the identity and employment eligibility of newly hired employee using E-Verify procedures, the Employer establishes a rebuttable presumption that it has not violated section 274A(a)(1)(A) of the Immigration and Nationality Act (INA) with respect to the hiring of that employee; (3) If the Employer receives a final nonconfirmation for an employee, but continues to employ that person, the Employer must notify DHS and the Employer is subject to a civil money penalty between \$550 and \$1,100 for each failure to notify DHS of continued employment following a final nonconfirmation; (4) If the Employer continues to employ an employee after receiving a final nonconfirmation, then the Employer is subject to a rebuttable presumption that it has knowingly

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employed an unauthorized alien in violation of section 274A(a)(1)(A); and (5) no E-Verify participant is civilly or criminally liable under any law for any action taken in good faith based on information provided through the E-Verify.

b. DHS reserves the right to conduct Form I-9 compliance inspections, as well as any other enforcement or compliance activity authorized by law, including site visits, to ensure proper use of E-Verify.

9. The Employer is strictly prohibited from creating an E-Verify case before the employee has been hired, meaning that a firm offer of employment was extended and accepted and Form I-9 was completed. The Employer agrees to create an E-Verify case for new employees within three Employer business days after each employee has been hired (after both Sections 1 and 2 of Form I-9 have been completed), and to complete as many steps of the E-Verify process as are necessary according to the E-Verify User Manual. If E-Verify is temporarily unavailable, the three-day time period will be extended until it is again operational in order to accommodate the Employer's attempting, in good faith, to make inquiries during the period of unavailability.

10. The Employer agrees not to use E-Verify for pre-employment screening of job applicants, in support of any unlawful employment practice, or for any other use that this MOU or the E-Verify User Manual does not authorize.

11. The Employer must use E-Verify for all new employees. The Employer will not verify selectively and will not verify employees hired before the effective date of this MOU. Employers who are Federal contractors may qualify for exceptions to this requirement as described in Article II.B of this MOU.

12. The Employer agrees to follow appropriate procedures (see Article III below) regarding tentative nonconfirmations. The Employer must promptly notify employees in private of the finding and provide them with the notice and letter containing information specific to the employee's E-Verify case. The Employer agrees to provide both the English and the translated notice and letter for employees with limited English proficiency to employees. The Employer agrees to provide written referral instructions to employees and instruct affected employees to bring the English copy of the letter to the SSA. The Employer must allow employees to contest the finding, and not take adverse action against employees if they choose to contest the finding, while their case is still pending. Further, when employees contest a tentative nonconfirmation based upon a photo mismatch, the Employer must take additional steps (see Article III.B. below) to contact DHS with information necessary to resolve the challenge.

13. The Employer agrees not to take any adverse action against an employee based upon the employee's perceived employment eligibility status while SSA or DHS is processing the verification request unless the Employer obtains knowledge (as defined in 8 C.F.R. § 274a.1(l)) that the employee is not work authorized. The Employer understands that an initial inability of the SSA or DHS automated verification system to verify work authorization, a tentative nonconfirmation, a case in continuance (indicating the need for additional time for the government to resolve a case), or the finding of a photo mismatch, does not establish, and should not be interpreted as, evidence that the employee is not work authorized. In any of such cases, the employee must be provided a full and fair opportunity to contest the finding, and if he or she does so, the employee may not be terminated or suffer any adverse employment consequences based upon the employee's perceived employment eligibility status

Company ID Number: 1117197

(including denying, reducing, or extending work hours, delaying or preventing training, requiring an employee to work in poorer conditions, withholding pay, refusing to assign the employee to a Federal contract or other assignment, or otherwise assuming that he or she is unauthorized to work) until and unless secondary verification by SSA or DHS has been completed and a final nonconfirmation has been issued. If the employee does not choose to contest a tentative nonconfirmation or a photo mismatch or if a secondary verification is completed and a final nonconfirmation is issued, then the Employer can find the employee is not work authorized and terminate the employee's employment. Employers or employees with questions about a final nonconfirmation may call E-Verify at 1-888-464-4218 (customer service) or 1-888-897-7781 (worker hotline).

14. The Employer agrees to comply with Title VII of the Civil Rights Act of 1964 and section 274B of the INA as applicable by not discriminating unlawfully against any individual in hiring, firing, employment eligibility verification, or recruitment or referral practices because of his or her national origin or citizenship status, or by committing discriminatory documentary practices. The Employer understands that such illegal practices can include selective verification or use of E-Verify except as provided in part D below, or discharging or refusing to hire employees because they appear or sound "foreign" or have received tentative nonconfirmations. The Employer further understands that any violation of the immigration-related unfair employment practices provisions in section 274B of the INA could subject the Employer to civil penalties, back pay awards, and other sanctions, and violations of Title VII could subject the Employer to back pay awards, compensatory and punitive damages. Violations of either section 274B of the INA or Title VII may also lead to the termination of its participation in E-Verify. If the Employer has any questions relating to the anti-discrimination provision, it should contact OSC at 1-800-255-8155 or 1-800-237-2515 (TDD).

15. The Employer agrees that it will use the information it receives from E-Verify only to confirm the employment eligibility of employees as authorized by this MOU. The Employer agrees that it will safeguard this information, and means of access to it (such as PINS and passwords), to ensure that it is not used for any other purpose and as necessary to protect its confidentiality, including ensuring that it is not disseminated to any person other than employees of the Employer who are authorized to perform the Employer's responsibilities under this MOU, except for such dissemination as may be authorized in advance by SSA or DHS for legitimate purposes.

16. The Employer agrees to notify DHS immediately in the event of a breach of personal information. Breaches are defined as loss of control or unauthorized access to E-Verify personal data. All suspected or confirmed breaches should be reported by calling 1-888-464-4218 or via email at E-Verify@dhs.gov. Please use "Privacy Incident – Password" in the subject line of your email when sending a breach report to E-Verify.

17. The Employer acknowledges that the information it receives from SSA is governed by the Privacy Act (5 U.S.C. § 552a(i)(1) and (3)) and the Social Security Act (42 U.S.C. 1306(a)). Any person who obtains this information under false pretenses or uses it for any purpose other than as provided for in this MOU may be subject to criminal penalties.

18. The Employer agrees to cooperate with DHS and SSA in their compliance monitoring and evaluation of E-Verify, which includes permitting DHS, SSA, their contractors and other agents, upon

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reasonable notice, to review Forms I-9 and other employment records and to interview it and its employees regarding the Employer's use of E-Verify, and to respond in a prompt and accurate manner to DHS requests for information relating to their participation in E-Verify.

19. The Employer shall not make any false or unauthorized claims or references about its participation in E-Verify on its website, in advertising materials, or other media. The Employer shall not describe its services as federally-approved, federally-certified, or federally-recognized, or use language with a similar intent on its website or other materials provided to the public. Entering into this MOU does not mean that E-Verify endorses or authorizes your E-Verify services and any claim to that effect is false.

20. The Employer shall not state in its website or other public documents that any language used therein has been provided or approved by DHS, USCIS or the Verification Division, without first obtaining the prior written consent of DHS.

21. The Employer agrees that E-Verify trademarks and logos may be used only under license by DHS/USCIS (see [M-795 \(Web\)](#)) and, other than pursuant to the specific terms of such license, may not be used in any manner that might imply that the Employer's services, products, websites, or publications are sponsored by, endorsed by, licensed by, or affiliated with DHS, USCIS, or E-Verify.

22. The Employer understands that if it uses E-Verify procedures for any purpose other than as authorized by this MOU, the Employer may be subject to appropriate legal action and termination of its participation in E-Verify according to this MOU.

B. RESPONSIBILITIES OF FEDERAL CONTRACTORS

1. If the Employer is a Federal contractor with the FAR E-Verify clause subject to the employment verification terms in Subpart 22.18 of the FAR, it will become familiar with and comply with the most current version of the E-Verify User Manual for Federal Contractors as well as the E-Verify Supplemental Guide for Federal Contractors.

2. In addition to the responsibilities of every employer outlined in this MOU, the Employer understands that if it is a Federal contractor subject to the employment verification terms in Subpart 22.18 of the FAR it must verify the employment eligibility of any "employee assigned to the contract" (as defined in FAR 22.1801). Once an employee has been verified through E-Verify by the Employer, the Employer may not create a second case for the employee through E-Verify.

a. An Employer that is not enrolled in E-Verify as a Federal contractor at the time of a contract award must enroll as a Federal contractor in the E-Verify program within 30 calendar days of contract award and, within 90 days of enrollment, begin to verify employment eligibility of new hires using E-Verify. The Employer must verify those employees who are working in the United States, whether or not they are assigned to the contract. Once the Employer begins verifying new hires, such verification of new hires must be initiated within three business days after the hire date. Once enrolled in E-Verify as a Federal contractor, the Employer must begin verification of employees assigned to the contract within 90 calendar days after the date of enrollment or within 30 days of an employee's assignment to the contract, whichever date is later.

- b. Employers enrolled in E-Verify as a Federal contractor for 90 days or more at the time of a contract award must use E-Verify to begin verification of employment eligibility for new hires of the Employer who are working in the United States, whether or not assigned to the contract, within three business days after the date of hire. If the Employer is enrolled in E-Verify as a Federal contractor for 90 calendar days or less at the time of contract award, the Employer must, within 90 days of enrollment, begin to use E-Verify to initiate verification of new hires of the contractor who are working in the United States, whether or not assigned to the contract. Such verification of new hires must be initiated within three business days after the date of hire. An Employer enrolled as a Federal contractor in E-Verify must begin verification of each employee assigned to the contract within 90 calendar days after date of contract award or within 30 days after assignment to the contract, whichever is later.
- c. Federal contractors that are institutions of higher education (as defined at 20 U.S.C. 1001(a)), state or local governments, governments of Federally recognized Indian tribes, or sureties performing under a takeover agreement entered into with a Federal agency under a performance bond may choose to only verify new and existing employees assigned to the Federal contract. Such Federal contractors may, however, elect to verify all new hires, and/or all existing employees hired after November 6, 1986. Employers in this category must begin verification of employees assigned to the contract within 90 calendar days after the date of enrollment or within 30 days of an employee's assignment to the contract, whichever date is later.
- d. Upon enrollment, Employers who are Federal contractors may elect to verify employment eligibility of all existing employees working in the United States who were hired after November 6, 1986, instead of verifying only those employees assigned to a covered Federal contract. After enrollment, Employers must elect to verify existing staff following DHS procedures and begin E-Verify verification of all existing employees within 180 days after the election.
- e. The Employer may use a previously completed Form I-9 as the basis for creating an E-Verify case for an employee assigned to a contract as long as:
- i. That Form I-9 is complete (including the SSN) and complies with Article II.A.6,
 - ii. The employee's work authorization has not expired, and
 - iii. The Employer has reviewed the Form I-9 information either in person or in communications with the employee to ensure that the employee's Section 1, Form I-9 attestation has not changed (including, but not limited to, a lawful permanent resident alien having become a naturalized U.S. citizen).
- f. The Employer shall complete a new Form I-9 consistent with Article II.A.6 or update the previous Form I-9 to provide the necessary information if:
- i. The Employer cannot determine that Form I-9 complies with Article II.A.6,
 - ii. The employee's basis for work authorization as attested in Section 1 has expired or changed, or
 - iii. The Form I-9 contains no SSN or is otherwise incomplete.

Note: If Section 1 of Form I-9 is otherwise valid and up-to-date and the form otherwise complies with

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Article II.C.5, but reflects documentation (such as a U.S. passport or Form I-551) that expired after completing Form I-9, the Employer shall not require the production of additional documentation, or use the photo screening tool described in Article II.A.5, subject to any additional or superseding instructions that may be provided on this subject in the E-Verify User Manual.

g. The Employer agrees not to require a second verification using E-Verify of any assigned employee who has previously been verified as a newly hired employee under this MOU or to authorize verification of any existing employee by any Employer that is not a Federal contractor based on this Article.

3. The Employer understands that if it is a Federal contractor, its compliance with this MOU is a performance requirement under the terms of the Federal contract or subcontract, and the Employer consents to the release of information relating to compliance with its verification responsibilities under this MOU to contracting officers or other officials authorized to review the Employer's compliance with Federal contracting requirements.

C. RESPONSIBILITIES OF SSA

1. SSA agrees to allow DHS to compare data provided by the Employer against SSA's database. SSA sends DHS confirmation that the data sent either matches or does not match the information in SSA's database.

2. SSA agrees to safeguard the information the Employer provides through E-Verify procedures. SSA also agrees to limit access to such information, as is appropriate by law, to individuals responsible for the verification of Social Security numbers or responsible for evaluation of E-Verify or such other persons or entities who may be authorized by SSA as governed by the Privacy Act (5 U.S.C. § 552a), the Social Security Act (42 U.S.C. 1306(a)), and SSA regulations (20 CFR Part 401).

3. SSA agrees to provide case results from its database within three Federal Government work days of the initial inquiry. E-Verify provides the information to the Employer.

4. SSA agrees to update SSA records as necessary if the employee who contests the SSA tentative nonconfirmation visits an SSA field office and provides the required evidence. If the employee visits an SSA field office within the eight Federal Government work days from the date of referral to SSA, SSA agrees to update SSA records, if appropriate, within the eight-day period unless SSA determines that more than eight days may be necessary. In such cases, SSA will provide additional instructions to the employee. If the employee does not visit SSA in the time allowed, E-Verify may provide a final nonconfirmation to the employer.

Note: If an Employer experiences technical problems, or has a policy question, the employer should contact E-Verify at 1-888-464-4218.

D. RESPONSIBILITIES OF DHS

1. DHS agrees to provide the Employer with selected data from DHS databases to enable the Employer to conduct, to the extent authorized by this MOU:

a. Automated verification checks on alien employees by electronic means, and

- b. Photo verification checks (when available) on employees.
2. DHS agrees to assist the Employer with operational problems associated with the Employer's participation in E-Verify. DHS agrees to provide the Employer names, titles, addresses, and telephone numbers of DHS representatives to be contacted during the E-Verify process.
3. DHS agrees to provide to the Employer with access to E-Verify training materials as well as an E-Verify User Manual that contain instructions on E-Verify policies, procedures, and requirements for both SSA and DHS, including restrictions on the use of E-Verify.
4. DHS agrees to train Employers on all important changes made to E-Verify through the use of mandatory refresher tutorials and updates to the E-Verify User Manual. Even without changes to E-Verify, DHS reserves the right to require employers to take mandatory refresher tutorials.
5. DHS agrees to provide to the Employer a notice, which indicates the Employer's participation in E-Verify. DHS also agrees to provide to the Employer anti-discrimination notices issued by the Office of Special Counsel for Immigration-Related Unfair Employment Practices (OSC), Civil Rights Division, U.S. Department of Justice.
6. DHS agrees to issue each of the Employer's E-Verify users a unique user identification number and password that permits them to log in to E-Verify.
7. DHS agrees to safeguard the information the Employer provides, and to limit access to such information to individuals responsible for the verification process, for evaluation of E-Verify, or to such other persons or entities as may be authorized by applicable law. Information will be used only to verify the accuracy of Social Security numbers and employment eligibility, to enforce the INA and Federal criminal laws, and to administer Federal contracting requirements.
8. DHS agrees to provide a means of automated verification that provides (in conjunction with SSA verification procedures) confirmation or tentative nonconfirmation of employees' employment eligibility within three Federal Government work days of the initial inquiry.
9. DHS agrees to provide a means of secondary verification (including updating DHS records) for employees who contest DHS tentative nonconfirmations and photo mismatch tentative nonconfirmations. This provides final confirmation or nonconfirmation of the employees' employment eligibility within 10 Federal Government work days of the date of referral to DHS, unless DHS determines that more than 10 days may be necessary. In such cases, DHS will provide additional verification instructions.

ARTICLE III

REFERRAL OF INDIVIDUALS TO SSA AND DHS

A. REFERRAL TO SSA

1. If the Employer receives a tentative nonconfirmation issued by SSA, the Employer must print the notice as directed by E-Verify. The Employer must promptly notify employees in private of the finding and provide them with the notice and letter containing information specific to the employee's E-Verify

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case. The Employer also agrees to provide both the English and the translated notice and letter for employees with limited English proficiency to employees. The Employer agrees to provide written referral instructions to employees and instruct affected employees to bring the English copy of the letter to the SSA. The Employer must allow employees to contest the finding, and not take adverse action against employees if they choose to contest the finding, while their case is still pending.

2. The Employer agrees to obtain the employee's response about whether he or she will contest the tentative nonconfirmation as soon as possible after the Employer receives the tentative nonconfirmation. Only the employee may determine whether he or she will contest the tentative nonconfirmation.

3. After a tentative nonconfirmation, the Employer will refer employees to SSA field offices only as directed by E-Verify. The Employer must record the case verification number, review the employee information submitted to E-Verify to identify any errors, and find out whether the employee contests the tentative nonconfirmation. The Employer will transmit the Social Security number, or any other corrected employee information that SSA requests, to SSA for verification again if this review indicates a need to do so.

4. The Employer will instruct the employee to visit an SSA office within eight Federal Government work days. SSA will electronically transmit the result of the referral to the Employer within 10 Federal Government work days of the referral unless it determines that more than 10 days is necessary.

5. While waiting for case results, the Employer agrees to check the E-Verify system regularly for case updates.

6. The Employer agrees not to ask the employee to obtain a printout from the Social Security Administration number database (the Numident) or other written verification of the SSN from the SSA.

B. REFERRAL TO DHS

1. If the Employer receives a tentative nonconfirmation issued by DHS, the Employer must promptly notify employees in private of the finding and provide them with the notice and letter containing information specific to the employee's E-Verify case. The Employer also agrees to provide both the English and the translated notice and letter for employees with limited English proficiency to employees. The Employer must allow employees to contest the finding, and not take adverse action against employees if they choose to contest the finding, while their case is still pending.

2. The Employer agrees to obtain the employee's response about whether he or she will contest the tentative nonconfirmation as soon as possible after the Employer receives the tentative nonconfirmation. Only the employee may determine whether he or she will contest the tentative nonconfirmation.

3. The Employer agrees to refer individuals to DHS only when the employee chooses to contest a tentative nonconfirmation.

4. If the employee contests a tentative nonconfirmation issued by DHS, the Employer will instruct the

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employee to contact DHS through its toll-free hotline (as found on the referral letter) within eight Federal Government work days.

5. If the Employer finds a photo mismatch, the Employer must provide the photo mismatch tentative nonconfirmation notice and follow the instructions outlined in paragraph 1 of this section for tentative nonconfirmations, generally.

6. The Employer agrees that if an employee contests a tentative nonconfirmation based upon a photo mismatch, the Employer will send a copy of the employee's Form I-551, Form I-766, U.S. Passport, or passport card to DHS for review by:

- a. Scanning and uploading the document, or
- b. Sending a photocopy of the document by express mail (furnished and paid for by the employer).

7. The Employer understands that if it cannot determine whether there is a photo match/mismatch, the Employer must forward the employee's documentation to DHS as described in the preceding paragraph. The Employer agrees to resolve the case as specified by the DHS representative who will determine the photo match or mismatch.

8. DHS will electronically transmit the result of the referral to the Employer within 10 Federal Government work days of the referral unless it determines that more than 10 days is necessary.

9. While waiting for case results, the Employer agrees to check the E-Verify system regularly for case updates.

ARTICLE IV SERVICE PROVISIONS

A. NO SERVICE FEES

1. SSA and DHS will not charge the Employer for verification services performed under this MOU. The Employer is responsible for providing equipment needed to make inquiries. To access E-Verify, an Employer will need a personal computer with Internet access.

ARTICLE V MODIFICATION AND TERMINATION

A. MODIFICATION

1. This MOU is effective upon the signature of all parties and shall continue in effect for as long as the SSA and DHS operates the E-Verify program unless modified in writing by the mutual consent of all parties.

2. Any and all E-Verify system enhancements by DHS or SSA, including but not limited to E-Verify checking against additional data sources and instituting new verification policies or procedures, will be covered under this MOU and will not cause the need for a supplemental MOU that outlines these changes.

B. TERMINATION

1. The Employer may terminate this MOU and its participation in E-Verify at any time upon 30 days prior written notice to the other parties.
2. Notwithstanding Article V, part A of this MOU, DHS may terminate this MOU, and thereby the Employer's participation in E-Verify, with or without notice at any time if deemed necessary because of the requirements of law or policy, or upon a determination by SSA or DHS that there has been a breach of system integrity or security by the Employer, or a failure on the part of the Employer to comply with established E-Verify procedures and/or legal requirements. The Employer understands that if it is a Federal contractor, termination of this MOU by any party for any reason may negatively affect the performance of its contractual responsibilities. Similarly, the Employer understands that if it is in a state where E-Verify is mandatory, termination of this by any party MOU may negatively affect the Employer's business.
3. An Employer that is a Federal contractor may terminate this MOU when the Federal contract that requires its participation in E-Verify is terminated or completed. In such cases, the Federal contractor must provide written notice to DHS. If an Employer that is a Federal contractor fails to provide such notice, then that Employer will remain an E-Verify participant, will remain bound by the terms of this MOU that apply to non-Federal contractor participants, and will be required to use the E-Verify procedures to verify the employment eligibility of all newly hired employees.
4. The Employer agrees that E-Verify is not liable for any losses, financial or otherwise, if the Employer is terminated from E-Verify.

ARTICLE VI PARTIES

- A. Some or all SSA and DHS responsibilities under this MOU may be performed by contractor(s), and SSA and DHS may adjust verification responsibilities between each other as necessary. By separate agreement with DHS, SSA has agreed to perform its responsibilities as described in this MOU.
- B. Nothing in this MOU is intended, or should be construed, to create any right or benefit, substantive or procedural, enforceable at law by any third party against the United States, its agencies, officers, or employees, or against the Employer, its agents, officers, or employees.
- C. The Employer may not assign, directly or indirectly, whether by operation of law, change of control or merger, all or any part of its rights or obligations under this MOU without the prior written consent of DHS, which consent shall not be unreasonably withheld or delayed. Any attempt to sublicense, assign, or transfer any of the rights, duties, or obligations herein is void.
- D. Each party shall be solely responsible for defending any claim or action against it arising out of or related to E-Verify or this MOU, whether civil or criminal, and for any liability wherefrom, including (but not limited to) any dispute between the Employer and any other person or entity regarding the applicability of Section 403(d) of IIRIRA to any action taken or allegedly taken by the Employer.
- E. The Employer understands that its participation in E-Verify is not confidential information and may be disclosed as authorized or required by law and DHS or SSA policy, including but not limited to,

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Congressional oversight, E-Verify publicity and media inquiries, determinations of compliance with Federal contractual requirements, and responses to inquiries under the Freedom of Information Act (FOIA).

F. The individuals whose signatures appear below represent that they are authorized to enter into this MOU on behalf of the Employer and DHS respectively. The Employer understands that any inaccurate statement, representation, data or other information provided to DHS may subject the Employer, its subcontractors, its employees, or its representatives to: (1) prosecution for false statements pursuant to 18 U.S.C. 1001 and/or; (2) immediate termination of its MOU and/or; (3) possible debarment or suspension.

G. The foregoing constitutes the full agreement on this subject between DHS and the Employer.

To be accepted as an E-Verify participant, you should only sign the Employer's Section of the signature page. If you have any questions, contact E-Verify at 1-888-464-4218.



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Approved by:

Employer Kingsmen Coach Lines, LLC	
Name (Please Type or Print) Bernard Barnes	Title
Signature Electronically Signed	Date 08/09/2016
Department of Homeland Security – Verification Division	
Name (Please Type or Print)	Title
Signature	Date



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Information Required for the E-Verify Program

Information relating to your Company:

Company Name	Kingsmen Coach Lines, LLC
Company Facility Address	1570 Cedar Grove Road Conley, GA 30288
Company Alternate Address	P.O. Box 661 Conley, GA 30288
County or Parish	DEKALB
Employer Identification Number	205033628
North American Industry Classification Systems Code	485
Parent Company	
Number of Employees	10 to 19
Number of Sites Verified for	1



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Are you verifying for more than 1 site? If yes, please provide the number of sites verified for in each State:

GEORGIA

1 site(s)

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Information relating to the Program Administrator(s) for your Company on policy questions or operational problems:

Name Bernard Barnes
Phone Number (404) 362 - 9339
Fax Number (404) 362 - 0254
Email Address bbarnes_06@yahoo.com

Name Bernard Barnes
Phone Number (404) 362 - 9339
Fax Number (404) 362 - 0254
Email Address kingsmen@bellsouth.net

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