PILOT CAR
TRIP SHEET

DATE:

Company Name: **Driver :**

Phone # :

Truck # : **Trailer # :**

Load Description:

Over All Dimensions: Width: **FT** **IN** **Height:** **FT** **IN**

Length: **FT** **IN**

Dimensions confirmed: Escort Driver Initials: **Truck Driver Initials:**

Pick-up Address:	Destination Address:

DATE	START MILEAGE	ENDING MILEAGE	TOTAL MILES	OVER NIGHT
				☐ YES ☐ NO
				☐ YES ☐ NO
				☐ YES ☐ NO

DATE	DOWN TIME HRS.	REASON FOR DELAY

TOTAL MILES: **TOTAL OVER NIGHTS:**

DOWN TIME HRS.: **TOLLS:**

TOTAL NO GO'S:

X _____ **DATE:**

(ESCORT DRIVER'S SIGNITURE)

X _____ **DATE:**

(TRUCK DRIVER'S SIGNITURE)