



We are working with operators to make sure that they have an effective preventive maintenance programme. This will benefit the operator and enhance safety of all road users. This survey is designed to identify areas where the operator's vehicle preventive maintenance systems can be improved. We will then give you suggestions about how you can improve these areas. Thank you for taking the time to complete this survey.

Please complete or tick the appropriate boxes and send completed forms to Commercial Vehicle Testing, Road Safety Authority Clonfert House, Bride Street, Loughrea, Co. Galway. Email: cvtadmin@rsa.ie

GENERAL

Trading Name:						
Name of limited company (if applicable):						
Operational Contact Details						
Business category:	Owner/driver		Transportation type:	Goods		
	Own account			Passenger		
	Contract hire			Both		
Fleet:	Number of motor vehicles owned			Number of motor vehicles leased		
	Number of trailers owned			Number of trailers leased		
Type of business (%):	Local		%	International		%
	National		%	Schools		%

PERSONNEL

Name and Title						
Name of person responsible for roadworthiness of vehicles?						
Name and Title						
Name of the person who holds a CPC (Certificate of Professional Competence)?						
Who takes responsibility for authorising vehicles for use? Please give their name and title.						
How many drivers are employed?						

PERSONNEL CONTINUED

How many fitters are employed?							
What are their qualifications and experience?							
What outside services do you use?	Maintenance	Yes		No			
	Training	Yes		No			
	Tachograph analysis	Yes		No			
	If you answered 'Yes' to any of the above please give details.						

RECORDS

VEHICLE MAINTENANCE	<i>Motor vehicles and trailers.</i>						
Where is maintenance carried out?	In-house		Out sourced		Both		
On-site maintenance workshop?	Yes		No				
How do you plan your maintenance?	Scheduled		Ad hoc		Breakdown		
What scheduling system do you use?	Computer		Manual		Wall Chart		None
Is your scheduled maintenance time-based, mileage-based or based on the manufacturer's recommendations?	Time		Mileage		Manufacturer's recommendations		None
Give the time interval or mileage interval that you use to schedule maintenance.	Motor vehicle			Trailer			
Do you schedule vehicle testing? If so, what system do you use?	On or before due dates			When tax expires		Other	

MAINTENANCE SYSTEMS							
Vehicle inspections carried out	Motor vehicles				Trailer, if applicable		
Drivers walk-around checks:	None				None		
	Daily				Daily		
	Weekly				Weekly		
Are identified faults recorded?	Yes		No		Yes		No
Are there systems in place to make sure all identified faults are rectified?	Yes		No		Yes		No
If yes, give examples	Comments						
How are vehicle/trailer defects resolved and followed up?	Vehicle Comments				Trailer Comments		
Do you carry out routine vehicle safety inspections? And on your trailer, if applicable?	None		Every 6 Wks		None		Every 6 Wks
	Every 2 Wks		Every 4 Wks		Every 2 Wks		Every 4 Wks
	Every 12 Wks		Other		Every 12 Wks		Other
Are periodic brake tests conducted (other than roadworthiness test)? And on your trailer, if applicable?	Yes		No		How often?		
	Yes		No		How often?		
If yes, who performs periodic brake tests on your vehicle? And on your trailer, if applicable?	In-house		VTN Ctr		Other		
	In-house		VTN Ctr		Other		
Is there a defect book kept ?	No, none kept		Yes, in workshop		Yes, in vehicle		
Is it a multi-copy format so someone is notified of the defect?	Yes				No		
Where does each copy go? (To the driver, repairer, office records, other)	Vehicle Comments				Trailer Comments		

MAINTENANCE COSTS (OPTIONAL)								
Are vehicle maintenance costs recorded?	Motor vehicles				Trailer, if applicable			
Scheduled costs	Yes		No		Yes		No	
Unscheduled costs	Yes		No		Yes		No	
Total cost per vehicle	Yes		No		Yes		No	
Are frequent failures or use of spare parts monitored?	Yes		No		Yes		No	
Are changes to costs monitored (for example, tyres, fuel, insurance and brake components)?	Yes		No		Yes		No	
Have you achieved cost benefits from a preventive maintenance programme? For example, reduction in fuel cost, fewer breakdowns, improved on-time delivery, fewer roadworthiness infringements? If 'Yes' please give details.								
OTHER								
INCIDENTS AND ACCIDENTS :								
Are Incidents and accidents recorded and retained?	Yes		No					
Do you have any additional safety measures? If you do please detail them here.								
Do you have a driver-incentive scheme?	Yes		No		Example			
Any additional comments?								

Údarás Um Shábháilteacht Ar Bhóithre
Road Safety Authority

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