

Appendix A: CDL Certification Form

Michigan Department of State
COMMERCIAL DRIVER'S LICENSE CERTIFICATION

Full Name: (Please Print)	Date of Birth:
Driver License Number:	* Social Security Number:

* Disclosure of your Social Security number is required by Section 257.307(1)(b) of the Michigan Vehicle Code (P.A. 300 of 1949). This information will be used for commercial driver identification purposes in accordance with Section 383.153(d) of the Federal Motor Carrier Safety Regulations.

I am applying for the following Commercial Driver License (CDL):

CDL GROUP DESIGNATOR: (Choose only one.)	
You are responsible for knowing the gross vehicle weight rating (GVWR) or the gross combination weight rating (GCWR) of the vehicle(s) you drive.	
<input type="checkbox"/> GROUP A A vehicle towing a vehicle or trailer with a gross vehicle weight rating (GVWR) of 10,001 pounds or more when the gross combination weight rating (GCWR) is 26,001 pounds or more.	<input type="checkbox"/> GROUP B A vehicle with a GVWR of 26,001 pounds or more. The Group B allows for towing trailers or other vehicles with a gross vehicle weight rating (GVWR) of 10,000 pounds or less.
<input type="checkbox"/> GROUP C A single vehicle with a GVWR of 26,000 pounds <u>or less</u> or a vehicle with a GVWR of 26,000 pounds <u>or less</u> towing a trailer or other vehicle and used to transport (16) or more passengers, including the driver, or to carry hazardous material in amounts requiring a placard.	
CDL ENDORSEMENTS: (Choose as many as you need.)	
<input type="checkbox"/> H – HAZARDOUS MATERIALS - Needed to carry hazardous materials in amounts requiring a placard.	
<input type="checkbox"/> N – TANKERS - Needed to haul liquids or liquefied gases in permanently mounted cargo tanks rated at 119 gallons or more or portable cargo tanks rated at 1,000 gallons or more.	
<input type="checkbox"/> P – PASSENGER VEHICLES - Needed to operate any vehicle designed to carry 16 or more people, including the driver.	
<input type="checkbox"/> S – SCHOOL BUS - Needed to operate school bus with capacity of 16 passengers or more, including the driver. Must be obtained in conjunction with a P Endorsement.	
<input type="checkbox"/> T – DOUBLE TRAILERS - Needed when towing two trailers with a single power unit.	
CDL RESTRICTIONS: (Choose only one)	
The vehicle I will operate is:	<input type="checkbox"/> Equipped with air brakes <input type="checkbox"/> Not equipped with air brakes (Restriction Code 28)
DRIVER CERTIFICATION: Please answer all of the following questions. Your driving record will be verified before you take any tests. A starred (*) response to one or more of these questions will disqualify you from obtaining a CDL.	
1. Do you reside at a permanent Michigan address with the intention of remaining in Michigan?	<input type="checkbox"/> Yes <input type="checkbox"/> No *
2. Do you have a driver's license from more than one state? (Section 257.301 of the Michigan Vehicle Code and 49 CFR Part 383.21 of the Federal Safety Rules prohibit drivers from having more than one driver's license.)	<input type="checkbox"/> Yes <input type="checkbox"/> No
3. Are you currently disqualified or suspended from operating commercial motor vehicles in Michigan or any state?	<input type="checkbox"/> Yes * <input type="checkbox"/> No
4. Is your driving privilege currently suspended, revoked, denied, or canceled in Michigan or any state?	<input type="checkbox"/> Yes * <input type="checkbox"/> No
5. Will you be driving a commercial motor vehicle into other states (interstate operation)? If yes, please answer question # 5a. If no, go directly to question # 6.	<input type="checkbox"/> Yes <input type="checkbox"/> No
5a. Do you meet the driver qualification standards as stated in 49 CFR Part 391 of the Federal Safety Rules? Unless exempt, this includes having a valid Medical Examiner's Certificate (DOT card) or medical waiver.	<input type="checkbox"/> Yes <input type="checkbox"/> No *
6. Will you be driving a commercial motor vehicle only within the state of Michigan (intrastate operation)?	<input type="checkbox"/> Yes <input type="checkbox"/> No
6a. Do you meet the driver qualification standards as required by the Michigan Motor Carrier Safety Act (1963 PA 181), Michigan Pupil Transportation Act (1990 PA 187) or the Michigan Motor Bus Transportation Act (1982 PA 432)? Unless exempt, this includes having a valid Medical Examiner's Certificate (DOT or School Bus card) or medical waiver.	<input type="checkbox"/> Yes <input type="checkbox"/> No *
7. If required, is the vehicle that you will use for the CDL skills test representative of the vehicle that you will operate, once licensed?	<input type="checkbox"/> Yes <input type="checkbox"/> No
8. As required by the Federal Motor Carrier Safety Regulations, Part 383, section 73, please list any state where you have held a previous license within the last ten years.	_____
I certify the information disclosed on this form is true. I understand making a false statement when applying for a driver's license is a crime.	
Signature: X	Date: