HPC Transportation Daily Documentation

Provider Name		Provider #			Vehicle License #	Modified Vehicle? Y/N	
Individual			Ind. Medic	aid #	Month	Year	
Date	Odometer Start	Odometer End	Total Miles	Origination Point	Destination Point	Other Individuals Transported	Driver Initials

NMT Rule OAC 5123-9-18 Butler 12/2024

Driver's Signature ______ Initials _____ Driver's Signature _____ Initials _____

HPC Transportation Daily Inspection Checklist

Only Required for Modified Vehicles

Date	PreTrip Inspection (use initials)			Issues Noted? Describe	Actions Taken	Driver's
Date	Floor/Side	Harness/	Lift/	Issues Noted: Describe	Actions raken	Initials
	Fasteners	Belt	Ramp			