

**CARRIER INSPECTION**

CHP 343D (Rev. 2-99) OPI 062

This report contains **CONFIDENTIAL** pages.

Page 1 of 6

CARRIER NAME	CA NUMBER	LOC. CODE	SUBAREA
UNIVERSITY OF CALIFORNIA	40015	720	C44
STREET ADDRESS, CITY, STATE, ZIP CODE	PHONE NUMBER	DATE	
1156 High St Santa Cruz, Ca 95064	(831) 459-3887	09/14/2023	
CARRIER REPRESENTATIVE	TITLE	TIME IN	TIME OUT
Vanessa Ackerman	Exec. Assistant	0800	1200
INSPECTION LOCATION (if other than the carrier's principal place of business)	U.S. DOT NUMBER	MC NUMBER	
	2662585		

On this date, the above named motor carrier was inspected by the California Highway Patrol. The inspection evaluated the carrier's compliance with the following requirements:

CONTROLLED SUBSTANCES & ALCOHOL TESTING PROGRAM [VC 34520 & 49 CFR 382]

OTHER: \_\_\_\_\_

REMARKS

Carrier is currently enrolled in a drug and alcohol testing program with:


WorkforceQA, LLC  
1430 S Main St  
Salt Lake City, UT 84115  
801-503-3400

As a result of the inspection noted above, this carrier was assigned a compliance rating of SATISFACTORY  
This rating applies only to carrier requirements - Terminals are rated separately.


RATING HISTORY	NO. OF RECORDS INSPECTED	NO. OF VIOLATIONS	CHP 345 ISSUED	SUSPENSE DATE	CHP 100D COLUMN NO.
1 <u>S</u> 2 <u>S</u> 3 <u>S</u> 4 <u>S</u>	30		<input type="checkbox"/>	<input checked="" type="checkbox"/> Auto <input type="checkbox"/> None	
INSPECTED BY (Name)	ID NUMBER	CARRIER TYPE			
C Jasso 916-849-5006 cjasso@chp.ca.gov	A11250	<input type="checkbox"/> Truck <input checked="" type="checkbox"/> Bus			

**MOTOR CARRIER CERTIFICATION**

I hereby certify that all violations recorded hereon and on the attached pages (2 through \_\_\_\_\_) will be corrected in accordance with applicable provisions of the California Vehicle Code and the California Code of Regulations. I understand that I may request a review of an unsatisfactory rating by contacting the COASTAL Division Motor Carrier Safety Unit Supervisor at 805-549-3261 within 5 calendar days of the rating.

CARRIER REPRESENTATIVE'S PRINTED NAME	TITLE	DRIVER LICENSE NUMBER	STATE
Steve Raaymakers	Assist Transit Manager		
CARRIER REPRESENTATIVE'S SIGNATURE	CURRENT CARRIER RATING	DATE	
	SATISFACTORY	09/14/2023	

**California Highway Patrol**

	<b>US DOT #</b> 2662585	<b>Legal:</b> UNIVERSITY OF CALIFORNIA <b>Operating (DBA):</b> UNIVERSITY OF CALIFORNIA SANTA CRUZ				
<b>MC/MX #:</b>	<b>State #:</b> 40015	<b>Federal Tax ID:</b> 94-1539563 (EIN)				
<b>Review Type:</b> Non-ratable Review - Special Study						
<b>Scope:</b>	Terminal	<b>Location of Review/Audit:</b> Company facility in the U. S.		<b>Territory:</b>		
<b>Operation Types</b>	<b>Interstate</b>	<b>Intrastate</b>				
<b>Carrier:</b>	N/A	Non-HM	<b>Business:</b> Corporation			
<b>Shipper:</b>	N/A	N/A	<b>Gross Revenue:</b> _____ <b>for year ending:</b> _____			
<b>Cargo Tank:</b>	N/A					
<b>Company Physical Address:</b>						
1156 HIGH ST SANTA CRUZ, CA 95064						
<b>Contact Name:</b> Tracy Freeman						
<b>Phone numbers:</b> (1) 831- 459-3887 (2) _____ <b>Fax</b> _____						
<b>E-Mail Address:</b> _____						
<b>Company Mailing Address:</b>						
1156 HIGH ST SANTA CRUZ, CA 95064						
<b>Carrier Classification</b>						
Private Passenger, Non-business						
<b>Cargo Classification</b>						
Passengers						
<b>Equipment</b>						
	<b>Owned</b>	<b>Term Leased</b>	<b>Trip Leased</b>	<b>Owned</b>	<b>Term Leased</b>	<b>Trip Leased</b>
Motor Coach	24	0	0			
<b>Power units used in the U.S.:</b> 24						
<b>Percentage of time used in the U.S.:</b> 100						
<b>Does carrier transport placardable quantities of HM?</b> No						
<b>Is an HM Permit required?</b> N/A						
<b>Driver Information</b>						
	<b>Inter</b>	<b>Intra</b>	<b>Average trip leased drivers/month:</b> 0			
<b>&lt; 100 Miles:</b>		30	<b>Total Drivers:</b> 30			
<b>&gt;= 100 Miles:</b>			<b>CDL Drivers:</b> 30			





UNIVERSITY OF CALIFORNIA SANTA CRUZ (UNIVERSITY OF dba) - Terminal

U.S. DOT #: 2662585

State #: 40015

Review Date:

09/14/2023

**Part A**

QUESTIONS regarding this report may be directed to the Coastal Division  
Motor Carrier Safety Unit at:

4115 Broad Street, Ste B-10  
San Luis Obispo, CA 93401  
805-549-3261

**This TERMINAL REVIEW deals only with safety compliance at this terminal.**

**Person(s) Interviewed**

**Name:** Tracy Freeman

**Title:** Transit Manager

**Name:**

**Title:**





UNIVERSITY OF CALIFORNIA SANTA CRUZ (UNIVERSITY OF dba) - Terminal

U.S. DOT #: 2662585

State #: 40015

Review Date:

09/14/2023

**Part B Violations**

**Safety Fitness Rating Information:**

Total Miles Operated 100,000  
Recordable Accidents 0

OOS Vehicle (CR): 0

Number of Vehicle Inspected (CR): 0

OOS Vehicle (MCMIS): 0

Number of Vehicles Inspected (MCMIS): 0

Your proposed safety rating is :

**This Review is not Rated.**





UNIVERSITY OF CALIFORNIA SANTA CRUZ (UNIVERSITY OF dba) - Terminal

U.S. DOT #: 2662585

State #: 40015

Review Date:

09/14/2023

### Part B Requirements and/or Recommendations

1. QUESTIONS regarding this report may be directed to the Coastal Division Motor Carrier Unit at:

Broad St, Suite B-10  
San Luis Obispo, Ca 93401-7992  
Phone (805)-549-3261





UNIVERSITY OF CALIFORNIA SANTA CRUZ (UNIVERSITY OF dba) - Terminal

U.S. DOT #: 2662585

State #: 40015

Review Date:

09/14/2023

**Part C**

**Reason for Review:** Other CSAT

**Planned Action:** Compliance Monitoring

**Parts Reviewed Certification:**

325 382 383 387 390 391 392 393 395 396 397 398 399 171 172 173 177 178 180

**Prior Reviews**

**Prior Prosecutions**

**Reason not Rated:** Special Study

**Study Code:** CA

9/7/2021

9/25/2020

7/14/2020

**Unsat/Unfit Information**

**Is the motor carrier of passengers subject to the safety fitness procedures contained in 49 CFR part 385 subpart A, AND does it transport passengers in a commercial motor vehicle?**

Yes - Intrastate

**Does carrier transport placardable quantities of hazardous materials?**

**Unsat/Unfit rule:**

Not Applicable

**Corporate Contact:** Tracy Freeman

**Special Study Information:**

**Corporate Contact Title:** Transit Manager

**Remarks:**

Terminal Name: UNIVERSITY OF SANTA CRUZ CA# - 40015

Terminal Address: 1156 High St Santa Cruz, Ca 95064 FCN - 43843

**Rating Information:**

In accordance with 13 CCR 1233, this carrier has been rated Satisfactory at this time.

<b>Upload Authorized:</b>	<b>Yes</b>	<b>No</b>
<b>Authorized by:</b>		<b>Date:</b>
<b>Uploaded:</b>	<b>Yes</b>	<b>No</b>
<b>Verified by:</b>		<b>Failure Code:</b>
		<b>Date:</b>



**SAFETY COMPLIANCE REPORT/  
TERMINAL RECORD UPDATE**

CHP 343 (Rev. 12-17) OPI 062

NEW TERMINAL INFORMATION <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		CA NUMBER 40015	FILE CODE NUMBER 43843	COUNTY CODE 44	BED
TERMINAL TYPE <input type="checkbox"/> Truck <input checked="" type="checkbox"/> Bus <input type="checkbox"/> Mod Limo		CODE B	OTHER PROGRAM(S)	LOCATION CODE 720	SUBAREA C44

CARRIER LEGAL NAME <b>UNIVERSITY OF CALIFORNIA</b>	TERMINAL NAME (IF DIFFERENT) <b>UC SANTA CRUZ-TRANSPORTATION</b>	TELEPHONE NUMBER (W/ AREA CODE) <b>(831) 459-2491</b>
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TERMINAL STREET ADDRESS (NUMBER, STREET, CITY, ZIP CODE)  
**1156 High St Santa Cruz, Ca 95064**

MAILING ADDRESS (NUMBER, STREET, CITY, ZIP CODE) (IF DIFFERENT FROM ABOVE)	INSPECTION LOCATION (NUMBER, STREET, CITY OR COUNTY)
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**LICENSE, FLEET AND TERMINAL INFORMATION**

H/M LIC. NO.	HWT REG. NO.	IMS LIC. NO.	TRUCKS AND TYPES	TRAILERS AND TYPES	PASS VEH. BY TYPE <b>I 24 II</b>	Mod Limo <input type="checkbox"/> Mod <input checked="" type="checkbox"/> Limo	DRIVERS 30	BIT FLEET SIZE Powered
EXP. DATE	EXP. DATE	EXP. DATE	REG. CT.	HW VEH.	HW CONT.	PPB/CSAT <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A		Towed
TERMINALS IDENTIFIED IN SECTION 34515(b) CVC <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			FILE CODE NUMBERS OF TERMINALS INCLUDED IN INSPECTION AS A RESULT OF SECTION 34515(b) CVC					

**EMERGENCY CONTACTS (In Calling Order of Preference)**

EMERGENCY CONTACT (NAME) <b>Tracy Freeman</b>	DAY TELEPHONE NO. (W/ AREA CODE) <b>(831) 459-3228</b>	NIGHT TELEPHONE NO. (W/ AREA CODE) <b>(831) [REDACTED]</b>
EMERGENCY CONTACT (NAME) <b>Jose Medrano</b>	DAY TELEPHONE NO. (W/ AREA CODE) <b>(831) 459-2491</b>	NIGHT TELEPHONE NO. (W/ AREA CODE) <b>(831) [REDACTED]</b>

**ESTIMATED CALIFORNIA MILEAGE FOR THIS TERMINAL FOR LAST YEAR [ 2022 ]**

A <input type="checkbox"/> UNDER 15,000	B <input type="checkbox"/> 15,001 - 50,000	C <input checked="" type="checkbox"/> 50,001 - 100,000	D <input type="checkbox"/> 100,001 - 500,000	E <input type="checkbox"/> 500,001 - 1,000,000	F <input type="checkbox"/> 1,000,001 - 2,000,000	G <input type="checkbox"/> 2,000,001 - 5,000,000	H <input type="checkbox"/> 5,000,001 - 10,000,000	I <input type="checkbox"/> MORE THAN 10,000,000
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**OPERATING AUTHORITIES OR PERMITS**

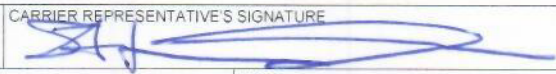
PUC <input type="checkbox"/> T	<input type="checkbox"/> TCP <input type="checkbox"/> PSC	MOTOR CARRIER OF PROPERTY PERMIT ACTIVE <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A	IMS FITNESS EVALUATION <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
USDOT 2662585	<input type="checkbox"/> MC <input type="checkbox"/> MX	<input type="checkbox"/> MC <input type="checkbox"/> MX	REASON FOR INSPECTION Annual Bus Terminal

<b>INSPECTION FINDINGS</b>		<b>INSPECTION RATINGS: S = Satisfactory U = Unsatisfactory C = Conditional UR = Unrated N/A = Not Applicable</b>				
REQUIREMENTS	VIOL	MAINTENANCE PROGRAM	DRIVER RECORDS	REG. EQUIPMENT	HAZARDOUS MATERIALS	TERMINAL
MAINTENANCE PROGRAM		1 S 2 S 3 S 4 S	1 S 2 S 3 S 4 S	1 S 2 S 3 S 4 S	1 N/A 2 3 4	1 S 2 S 3 S 4 S
DRIVER RECORDS		No. 6 Time 3.5	No. 23 Time 2.5	No. 6 Time 7.0	TIME	TOTAL TIME 13.0
DRIVER HOURS		HAZARDOUS MATERIALS <input checked="" type="checkbox"/> No H/M Transported <input type="checkbox"/> No H/M violations noted		CONTAINERS/TANKS No. Time	VEHICLES PLACED OUT-OF-SERVICE Vehicles Units	
BRAKES		REMARKS				
LAMPS & SIGNALS	1					
CONNECTING DEVICES						
STEERING & SUSPENSION						
TIRES & WHEELS						
EQUIPMENT REQUIREMENTS	1					
CONTAINERS & TANKS						
HAZARDOUS MATERIALS						


INSPECTION TYPE <input type="checkbox"/> I <input type="checkbox"/> R	NON-BIT <input type="checkbox"/>	CPSS <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	CHP 345 <input type="checkbox"/>	CHP 100D COL. <input type="checkbox"/>	INSPECTION DATE(S) 09/12-14/2023	TIME IN 0700	TIME OUT 0800
INSPECTED BY (NAME(S)) C Jasso 916-849-5006 cjasso@chp.ca.gov				ID NUMBER(S) A11250	SUSPENSE DATE <input checked="" type="checkbox"/> Auto <input type="checkbox"/> None		

**MOTOR CARRIER CERTIFICATION**

I hereby certify that all violations described hereon and recorded on the attached pages (2 through 12), will be corrected in accordance with applicable provisions of the California Vehicle Code and the California Code of Regulations. I understand that I may request a review of an unsatisfactory rating by contacting the Motor Carrier Safety Unit Supervisor at (805) 549-3261 within 5 business days of the rating.

CURRENT TERMINAL RATING <b>SATISFACTORY</b>	CARRIER REPRESENTATIVE'S SIGNATURE 	DATE 09/14/2023
CARRIER REPRESENTATIVE'S PRINTED NAME Steve Raaymakers	TITLE Assist Transit Manager	DRIVER LICENSE NUMBER STATE

**California Highway Patrol**

	<b>US DOT #</b> 2662585	<b>Legal:</b> UNIVERSITY OF CALIFORNIA				
		<b>Operating (DBA):</b> UNIVERSITY OF CALIFORNIA SANTA CRUZ				
<b>MC/MX #:</b>	<b>State #:</b> 40015	<b>Federal Tax ID:</b> 94-1539563 (EIN)				
<b>Review Type:</b> Non-ratable Review - Special Study						
<b>Scope:</b> Terminal	<b>Location of Review/Audit:</b> Company facility in the U. S.			<b>Territory:</b>		
<b>Operation Types</b>						
	<b>Interstate</b>	<b>Intrastate</b>				
<b>Carrier:</b>	N/A	Non-HM	<b>Business:</b> Corporation			
<b>Shipper:</b>	N/A	N/A	<b>Gross Revenue:</b>			
<b>Cargo Tank:</b>	N/A		<b>for year ending:</b>			
<b>Company Physical Address:</b>						
1156 HIGH ST SANTA CRUZ, CA 95064						
<b>Contact Name:</b> Tracy Freeman						
<b>Phone numbers:</b> (1) 831- 459-3887		(2)	<b>Fax</b>			
<b>E-Mail Address:</b>						
<b>Company Mailing Address:</b>						
1156 HIGH ST SANTA CRUZ, CA 95064						
<b>Carrier Classification</b>						
Private Passenger, Non-business						
<b>Cargo Classification</b>						
Passengers						
<b>Equipment</b>						
	<b>Owned</b>	<b>Term Leased</b>	<b>Trip Leased</b>	<b>Owned</b>	<b>Term Leased</b>	<b>Trip Leased</b>
Motor Coach	24	0	0			
Power units used in the U.S.: 24						
Percentage of time used in the U.S.: 100						
<b>Does carrier transport placardable quantities of HM?</b>			No			
<b>Is an HM Permit required?</b>			N/A			
<b>Driver Information</b>						
	<b>Inter</b>	<b>Intra</b>	<b>Average trip leased drivers/month:</b> 0			
<b>&lt; 100 Miles:</b>		30	<b>Total Drivers:</b> 30			
<b>&gt;= 100 Miles:</b>			<b>CDL Drivers:</b> 30			







UNIVERSITY OF CALIFORNIA SANTA CRUZ (UNIVERSITY OF dba) - Terminal

U.S. DOT #: 2662585

State #: 40015

Review Date:

09/14/2023

**Part A**

QUESTIONS regarding this report may be directed to the Coastal Division  
Motor Carrier Safety Unit at:

4115 Broad Street, Ste B-10  
San Luis Obispo, CA 93401  
805-549-3261

**This TERMINAL REVIEW deals only with safety compliance at this terminal.**

**Person(s) Interviewed**

**Name:** Tracy Freeman

**Title:** Transit Manager

**Name:**

**Title:**





**UNIVERSITY OF CALIFORNIA SANTA CRUZ (UNIVERSITY OF dba) - Terminal**  
U.S. DOT #: 2662585 State #: 40015

Review Date:  
09/14/2023

**Part B Violations**

**Safety Fitness Rating Information:**

**Total Miles Operated** 100,000  
**Recordable Accidents** 0

**OOS Vehicle (CR):** 0  
**Number of Vehicle Inspected (CR):** 6  
**OOS Vehicle (MCMIS):** 0  
**Number of Vehicles Inspected (MCMIS):**

Your proposed safety rating is :

**This Review is not Rated.**





UNIVERSITY OF CALIFORNIA SANTA CRUZ (UNIVERSITY OF dba) - Terminal

U.S. DOT #: 2662585

State #: 40015

Review Date:

09/14/2023

**Part B Requirements and/or Recommendations**

1. QUESTIONS regarding this report may be directed to the Coastal Division Motor Carrier Unit at:

Broad St, Suite B-10  
San Luis Obispo, Ca 93401-7992  
Phone (805)-549-3261





**Part C**

**Reason for Review:** Other ANNUAL BUS TERMINAL  
**Planned Action:** Compliance Monitoring

**Parts Reviewed Certification:**

325 382 383 387 390 391 392 393 395 396 397 398 399 171 172 173 177 178 180

**Prior Reviews**      **Prior Prosecutions**      **Reason not Rated:** Special Study      **Study Code:** CA  
 9/8/2022  
 9/8/2022  
 9/7/2021

**Unsat/Unfit Information**

Is the motor carrier of passengers subject to the safety fitness procedures contained in 49 CFR part 385 subpart A, AND does it transport passengers in a commercial motor vehicle?      Yes - Intrastate  
 Does carrier transport placardable quantities of hazardous materials?      Not Applicable  
**Unsat/Unfit rule:**      Not Applicable

**Corporate Contact:** Tracy Freeman      **Special Study Information:**  
**Corporate Contact Title:** Transit Manager

**Remarks:**

Terminal Name: UNIVERSITY OF SANTA CRUZ CA# - 40015  
 Terminal Address: 1156 High St Santa Cruz, Ca 95064 FCN - 43843

**Rating Information:**

In accordance with 13 CCR 1233, this terminal has been rated Satisfactory at this time.

<b>Upload Authorized:</b>	<b>Yes</b>	<b>No</b>
<b>Authorized by:</b>		<b>Date:</b>
<b>Uploaded:</b>	<b>Yes</b>	<b>No</b> <b>Failure Code:</b>
<b>Verified by:</b>		<b>Date:</b>





California Highway Patrol  
4115 Broad Street, #B-10  
San Luis Obispo, CA 93401  
Phone: (805) 549-3261  
Internationally Accredited Agency CHP407F/343A

Report Number: CAN8OI001163  
Inspection Date: 09/12/2023  
Start: 12:00 PM PT End: 1:00 PM PT  
Inspection Level: V - Terminal  
HM Inspection Type: None

Carrier: UNIVERSITY OF CALIFORNIA  
DBA: UNIVERSITY OF CALIFORNIA SANTA CRUZ  
1156 HIGH ST  
SANTA CRUZ, CA, 95064  
USDOT: 2662585 Phone#: (831)459-3887  
MC/MX#: Fax#: (831)459-5259  
State#:  
Location: COASTAL DIVISION  
Highway:  
County: SANTA CRUZ

Driver:  
License#: State:  
Date of Birth:  
CoDriver:  
License#: State:  
Date of Birth:

Milepost: Shipper: N/A  
Origin: N/A Bill of Lading: N/A  
Destination: N/A Cargo: N/A

**VEHICLE IDENTIFICATION**

Unit	Type	Make	Year	State	Plate	Equipment ID	VIN	GVWR	CVSA Existing	CVSA #
1	BU	GILG	1993	CA	1353255	7936	15GCB0911P1084927	39600		

**BRAKE ADJUSTMENTS**

Axle #	1	2
Right	1 1/8	1 1/2
Left	1 1/8	1 1/2
Chamber	C-24	C-36

**VIOLATIONS:** No violations were discovered

**HazMat:** No HM transported

**Placard:**

**Cargo Tank:**

**Special Checks:** No data for special checks

**State Information:**

Odometer: 584930; File Code Number: 43843; Passenger Capacity: 30; Bus Type: 1; Beat/Sub Area: C44; Special Project Code: N; Regulated Vehicle: Y; Pre-Cleared Vehicle: N; Veh #1 Type: 11

Report Prepared By: ID/Badge #:  
C. JASSO A11250

Copy Received By:

X

X





California Highway Patrol  
4115 Broad Street, #B-10  
San Luis Obispo, CA 93401  
Phone: (805) 549-3261  
Internationally Accredited Agency CHP407F/343A

Report Number: CAN8OI001162  
Inspection Date: 09/12/2023  
Start: 11:00 AM PT End: 12:00 PM PT  
Inspection Level: V - Terminal  
HM Inspection Type: None

Carrier: UNIVERSITY OF CALIFORNIA  
DBA: UNIVERSITY OF CALIFORNIA SANTA CRUZ  
1156 HIGH ST  
SANTA CRUZ, CA, 95064  
USDOT: 2662585 Phone#: (831)459-3887  
MC/MX#: State#: Fax#: (831)459-5259  
State#: Date of Birth:  
Location: COASTAL DIVISION Milepost: Shipper: N/A  
Highway: Origin: N/A Bill of Lading: N/A  
County: SANTA CRUZ Destination: N/A Cargo: N/A

**VEHICLE IDENTIFICATION**

Unit	Type	Make	Year	State	Plate	Equipment ID	VIN	GVWR	CVSA Existing	CVSA #
1	BU	GILG	1993	CA	1345634	7929	15GCB0918P1084813	39600		

**BRAKE ADJUSTMENTS**

Axle #	1	2
Right	1 1/8	1 1/2
Left	1 1/8	1 1/2
Chamber	C-24	C-36

**VIOLATIONS:** No violations were discovered

**HazMat:** No HM transported **Placard:** **Cargo Tank:**

**Special Checks:** No data for special checks

**State Information:**

Odometer: 212200; File Code Number: 43843; Passenger Capacity: 30; Bus Type: 1; Beat/Sub Area: C44; Special Project Code: N; Regulated Vehicle: Y; Pre-Cleared Vehicle: N; Veh #1 Type: 11

Report Prepared By: ID/Badge #:  
C. JASSO A11250

Copy Received By:

X

X



02662585 CA CAN8OI001162



California Highway Patrol  
4115 Broad Street, #B-10  
San Luis Obispo, CA 93401  
Phone: (805) 549-3261  
Internationally Accredited Agency CHP407F/343A

Report Number: CAN8OI001161  
Inspection Date: 09/12/2023  
Start: 10:00 AM PT End: 11:00 AM PT  
Inspection Level: V - Terminal  
HM Inspection Type: None

**Carrier:** UNIVERSITY OF CALIFORNIA  
**DBA:** UNIVERSITY OF CALIFORNIA SANTA CRUZ  
1156 HIGH ST  
SANTA CRUZ, CA, 95064  
**USDOT:** 2662585      **Phone#:** (831)459-3887  
**MC/MX#:**                      **Fax#:** (831)459-5259  
**State#:**                              **Driver:**  
**Location:** COASTAL DIVISION      **Milepost:**                      **Shipper:** N/A  
**Highway:**                              **Origin:** N/A                      **Bill of Lading:** N/A  
**County:** SANTA CRUZ                      **Destination:** N/A                      **Cargo:** N/A

**VEHICLE IDENTIFICATION**

Unit	Type	Make	Year	State	Plate	Equipment ID	VIN	GVWR	CVSA Existing	CVSA #
1	BU	GILG	1993	CA	1345627	7921	15GCB0916P1084938	39600		

**BRAKE ADJUSTMENTS**

Axle #	1	2
Right	1 1/8	1 1/2
Left	1 1/8	1 1/2
Chamber	C-24	C-36

**VIOLATIONS:** No violations were discovered  
**HazMat:** No HM transported                      **Placard:**                      **Cargo Tank:**  
**Special Checks:** No data for special checks

**State Information:**  
Odometer: 617124; File Code Number: 43843; Passenger Capacity: 30; Bus Type: 1; Beat/Sub Area: C44; Special Project Code: N; Regulated Vehicle: Y; Pre-Cleared Vehicle: N; Veh #1 Type: 11

Report Prepared By:      ID/Badge #:  
C. JASSO                      A11250  
  
X \_\_\_\_\_

Copy Received By:  
  
X \_\_\_\_\_





California Highway Patrol  
4115 Broad Street, #B-10  
San Luis Obispo, CA 93401  
Phone: (805) 549-3261  
Internationally Accredited Agency CHP407F/343A

Report Number: CAN8OI001160  
Inspection Date: 09/12/2023  
Start: 9:00 AM PT End: 10:00 AM PT  
Inspection Level: V - Terminal  
HM Inspection Type: None

Carrier: UNIVERSITY OF CALIFORNIA

DBA: UNIVERSITY OF CALIFORNIA SANTA CRUZ  
1156 HIGH ST  
SANTA CRUZ, CA, 95064

Driver:  
License#:  
Date of Birth:  
CoDriver:  
License#:  
Date of Birth:

State:

State:

USDOT: 2662585 Phone#: (831)459-3887  
MC/MX#: Fax#: (831)459-5259

State#:  
Location: COASTAL DIVISION

Milepost: Shipper: N/A  
Origin: N/A  
Destination: N/A

Bill of Lading: N/A  
Cargo: N/A

Highway:  
County: SANTA CRUZ

VEHICLE IDENTIFICATION

Unit	Type	Make	Year	State	Plate	Equipment ID	VIN	GVWR	CVSA Existing	CVSA #
1	BU	GILG	1993	CA	1345629	7924	15GCB0919P1084951	39600		

BRAKE ADJUSTMENTS

Axle #	1	2
Right	1 1/8	1 1/2
Left	1 1/8	1 1/2
Chamber	C-24	C-36

VIOLATIONS: No violations were discovered

HazMat: No HM transported

Placard:

Cargo Tank:

Special Checks: No data for special checks

State Information:

Odometer: 191667; File Code Number: 43843; Passenger Capacity: 30; Bus Type: 1; Beat/Sub Area: C44; Special Project Code: N; Regulated Vehicle: Y; Pre-Cleared Vehicle: N; Veh #1 Type: 11

Report Prepared By: ID/Badge #:  
C. JASSO A11250

Copy Received By:

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02662585 CA CAN8OI001160





California Highway Patrol  
4115 Broad Street, #B-10  
San Luis Obispo, CA 93401  
Phone: (805) 549-3261  
Internationally Accredited Agency CHP407F/343A

Report Number: CAN8OI001159  
Inspection Date: 09/12/2023  
Start: 8:00 AM PT End: 9:00 AM PT  
Inspection Level: V - Terminal  
HM Inspection Type: None

Carrier: UNIVERSITY OF CALIFORNIA  
DBA: UNIVERSITY OF CALIFORNIA SANTA CRUZ  
1156 HIGH ST  
SANTA CRUZ, CA, 95064  
USDOT: 2662585 Phone#: (831)459-3887  
MC/MX#: State#: Fax#: (831)459-5259  
State#: Location: COASTAL DIVISION  
Highway: County: SANTA CRUZ

Driver:  
License#: State:  
Date of Birth:  
CoDriver:  
License#: State:  
Date of Birth:  
Milepost: Shipper: N/A  
Origin: N/A Bill of Lading: N/A  
Destination: N/A Cargo: N/A

VEHICLE IDENTIFICATION

Unit	Type	Make	Year	State	Plate	Equipment ID	VIN	GVWR	CVSA Existing	CVSA #
1	BU	GILG	1993	CA	1345635	7934	15GCB0919P1084934	39600		

BRAKE ADJUSTMENTS

Axle #	1	2
Right	1 1/8	1 1/2
Left	1 1/8	1 1/2
Chamber	C-24	C-36

VIOLATIONS

Section	Type	Unit	OOS	CP	Citation #	Verify	Crash	Violations Discovered
1263 T-13 CCR	S	1	N	N		N	N	Bus has inadequate interior lamps--392.2--Specify: Driver dome light inoperative

HazMat: No HM transported

Placard:

Cargo Tank:

Special Checks: No data for special checks

State Information:

Odometer: 671315; File Code Number: 43843; Passenger Capacity: 30; Bus Type: 1; Beat/Sub Area: C44; Special Project Code: N; Regulated Vehicle: Y; Pre-Cleared Vehicle: N; Veh #1 Type: 11

Pursuant to Section 24004 CVC, violations recorded on this SafetyNet Inspection Report must be corrected prior to redispach. Violations marked out of service must be corrected before the vehicle is operated on the highway. For your convenience, KEEP THIS REPORT OR A COPY IN THE VEHICLE UNTIL ALL VIOLATIONS ARE CLEARED. This document should NOT be forwarded to the court for clearance procedures. DO NOT RETURN THIS FORM TO THE CALIFORNIA HIGHWAY PATROL.

Report Prepared By: ID/Badge #:  
C. JASSO A11250

Copy Received By:

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California Highway Patrol  
4115 Broad Street, #B-10  
San Luis Obispo, CA 93401  
Phone: (805) 549-3261  
Internationally Accredited Agency CHP407F/343A

Report Number: CAN8OI001158  
Inspection Date: 09/12/2023  
Start: 7:00 AM PT End: 8:00 AM PT  
Inspection Level: V - Terminal  
HM Inspection Type: None

Carrier: UNIVERSITY OF CALIFORNIA

DBA: UNIVERSITY OF CALIFORNIA SANTA CRUZ  
1156 HIGH ST  
SANTA CRUZ, CA, 95064

Driver:  
License#: State:

USDOT: 2662585 Phone#: (831)459-3887  
MC/MX#: Fax#: (831)459-5259

Date of Birth: State:  
CoDriver:  
License#: State:  
Date of Birth:

State#: Location: COASTAL DIVISION

Milepost: Shipper: N/A

Highway: County: SANTA CRUZ

Origin: Destination: Bill of Lading: N/A  
Cargo:

VEHICLE IDENTIFICATION

Unit	Type	Make	Year	State	Plate	Equipment ID	VIN	GVWR	CVSA Existing	CVSA #
1	BU	GILG	1993	CA	1436085	7939	15GCB0911P1084815	39600		

BRAKE ADJUSTMENTS

Axle #	1	2
Right	1 1/8	1 1/2
Left	1 1/8	1 1/2
Chamber	C-24	C-36

VIOLATIONS

Section	Type	Unit	OOS	CP	Citation #	VerifyCrash	Violations Discovered
1232(a) T-13 CCR/001	S	1	N	N		N N	Motor carrier fail to ensure general maintenance of vehicle--396.3A1--Specify: Loose battery cable 1 of 3 at main shut off switch .

HazMat: No HM transported

Placard: Cargo Tank:

Special Checks: No data for special checks

State Information:

Odometer: 15044; File Code Number: 43843; Passenger Capacity: 30; Beat/Sub Area: C44; Special Project Code: N;  
Regulated Vehicle: Y; Pre-Cleared Vehicle: N; Veh #1 Type: 11

Pursuant to Section 24004 CVC, violations recorded on this SafetyNet Inspection Report must be corrected prior to redispach. Violations marked out of service must be corrected before the vehicle is operated on the highway. For your convenience, KEEP THIS REPORT OR A COPY IN THE VEHICLE UNTIL ALL VIOLATIONS ARE CLEARED. This document should NOT be forwarded to the court for clearance procedures. DO NOT RETURN THIS FORM TO THE CALIFORNIA HIGHWAY PATROL.

Report Prepared By: ID/Badge #:  
C. JASSO A11250

Copy Received By:

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