

EMPLOYER NOTIFICATION OF TRAFFIC VIOLATION  
FOR COMMERCIAL DRIVER'S LICENSE (CDL)  
(Not necessary for parking violations)



NAME: \_\_\_\_\_ DATE: \_\_\_\_\_

DEPARTMENT: \_\_\_\_\_ TITLE: \_\_\_\_\_

DRIVER'S LICENSE #: \_\_\_\_\_ STATE: \_\_\_\_\_

DATE TICKETED: \_\_\_\_\_ CITATION NO: \_\_\_\_\_

TYPE OF TRAFFIC VIOLATION: \_\_\_\_\_

RESOLUTION OF CITATION: \_\_\_\_\_

VEHICLE OPERATED (*check one*):       Personal     City     Other

WAS VEHICLE A COMMERCIAL MOTOR VEHICLE?       Yes     No

LOCATION OF OFFENSE (CITY/COUNTY): \_\_\_\_\_ STATE: \_\_\_\_\_

ISSUING AGENCY: \_\_\_\_\_

DID VIOLATION RESULT IN LOSS OF DRIVING       Yes     No

PRIVILEGES? IF YES, PLEASE EXPLAIN:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
Employee Signature

\_\_\_\_\_  
Date

**Supervisor:** Send to the Human Resources Department within 24 hours of receipt.