PREMIUM TRANSPORTATION
5445 SOUTHWYCK BLVD, SUITE 210
800.661.3166 / 419.861.3430 X113/ FAX 419.491.6329
PAPERWORK@PTLLLC.COM

PLEASE SUBMIT THIS FORM BY THE 10TH OF THE MONTH FOR THE PRIOR MONTH.

MONTHLY MAINTENANCE REPORT

Driver Name: _____Truck #_____

Driver Phone #: _____

Date Submitted: _____ for the month of _____

Please Send Copies of All Repair Receipts

Date:	Repair or Maintenance Performed
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

Please send monthly via fax, Drive Axle, or in a PTL envelope.

Attn: Teri Butler