# AUDIT TYPE

**WESTERN AUSTRALIAN HEAVY VEHICLE ACCREDITATION AUDIT REPORT**

|  |  |  |  |
| --- | --- | --- | --- |
| **TICK AS APPROPRIATE** | | | |
| Systems Entry Audit |  | WAHVA – Maintenance Module |  |
| Entry Audit |  | WAHVA – Fatigue Module |  |
| Mass Entry Audit |  | WAHVA – Dimension & Loading Module |  |
| Compliance Audit |  | WAHVA – Mass Module |  |
| Re-entry Audit |  |  |  |
| Random Audit (MRWA ONLY) |  |  |  |
| Triggered Audit (MRWA ONLY) |  |  |  |
| Spot Check Audit (MRWA ONLY) |  | Remote Audit |  |

# OPERATOR CONTACT INFORMATION

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| WAHVA Operator Number | | |  | | |
| Company/Individual Legal Entity Name | | |  | | |
| Registered Business Name (As per ASIC web site) | | |  | | |
| Australian Business No. | |  | Australian Company No. | |  |
| Operator Main Business Address | | |  | | |
| Operator Main Postal Address | | |  | | |
| Full Operator Depot Address/s | | |  | | |
| Full Audit Location Address | | |  | | |
| Phone No. |  | | Mobile No. |  | |
| Email Address. | | |  | | |
| Operator Nominated Primary Contact Person | | |  | | |
| Date of Audit | | |  | | |

|  |  |
| --- | --- |
| Has the operators contact details changed since the last audit? | Yes / No |
| If yes, has a RAV Operator Registration Form been completed and submitted to Main Roads Heavy Vehicle Services, or the details updated via MOVES by the operator? | Yes / No |

# AUDIT ATTENDANCE LIST (NAMES AND POSITION TITLES INCLUDING AUDITORS)

|  |  |  |  |
| --- | --- | --- | --- |
| Name | Position Titles | Present at Entry Meeting | Present at Exit Meeting |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |

# NATURE/OVERVIEW OF OPERATOR BUSINESS (SUMMARY)

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|  |

# SUB-CONTRACTOR INFORMATION – WORKING UNDER THEIR OWN ACCREDITATION

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| --- | --- |
| Does the operator utilise Sub-Contractors working under their own WAHVA? |  |
| If Yes, is current evidence available to support this? |  |
| Does the operator utilise Sub-Contractors that work under this Operator’s WAHVA? |  |
| If Yes, is current evidence available to support this? |  |

# ACCREDITATION VEHICLE SUMMARY – Complete list from last audit date (Attach copy of fleet register)

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| No. of Powered Vehicles |  | No. of Dollies |  | No. of Trailers |  |
| No. of Powered Vehicles Sampled |  | No. of Dollies Sampled |  | No. of Trailers Sampled |  |

# ACCREDITATION DRIVER SUMMARY – Complete list from last audit date (Attach copy of employee/driver register)

|  |  |  |  |
| --- | --- | --- | --- |
| Number of drivers |  | Number of staff involved in rostering, scheduling & checking of trip sheets |  |
| Number of drivers sampled |  | Number of staff involved in rostering, scheduling & checking of trip sheets sampled |  |

# YEARLY COMPLIANCE SUMMARY

|  |  |  |
| --- | --- | --- |
| Dates of Bi-annual (6 monthly) Internal Reviews |  |  |

# AUDIT SUMMARY SHEET

|  |  |  |  |
| --- | --- | --- | --- |
| **COMPLIANCE CODES** | | | |
| **NA** | Not Applicable | **NAA** | Not Assessed at this Audit |
| **V** | Conformance Verified | **SFI** | Suggestion for Improvement |
| **C** | Non-Conformance Requiring Rectification by an Agreed Date Prior to Accreditation Being Allowed | | |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **WAHVA SYSTEM MANAGEMENT MODULE (Common Standards)** | | | | |
| REQUIREMENT OF STANDARD | COMPLIANCE CODE | CORRECTIVE ACTION REPORT (CAR) | AGREED CLOSEOUT DATE | ACTUAL CLOSEOUT DATE |
| Std 1. Responsibilities |  |  |  |  |
| Std 2. Records and Documentation |  |  |  |  |
| Std 3. Training and Education |  |  |  |  |
| Std 4. Internal Review |  |  |  |  |
| Std 5. Management of Accidents and Incidents |  |  |  |  |
| **FATIGUE MANAGEMENT MODULE** | | | | |
| REQUIREMENT OF STANDARD | COMPLIANCE CODE | CORRECTIVE ACTION REPORT (CAR) | AGREED CLOSEOUT DATE | ACTUAL CLOSEOUT DATE |
| Std 1. Scheduling |  |  |  |  |
| Std 2. Rostering |  |  |  |  |
| Std 3. Fitness for Work |  |  |  |  |
| Std 4. Workplace Conditions |  |  |  |  |
| **MAINTENANCE MANAGEMENT MODULE** | | | | |
| REQUIREMENT OF STANDARD | COMPLIANCE CODE | CORRECTIVE ACTION REPORT (CAR) | AGREED CLOSEOUT DATE | ACTUAL CLOSEOUT DATE |
| Std 1. Vehicle Control |  |  |  |  |
| Std 2. Daily Check |  |  |  |  |
| Std 3. Fault Recording and Reporting |  |  |  |  |
| Std 4. Fault Repair |  |  |  |  |
| Std 5. Maintenance Schedules and Methods |  |  |  |  |
| **DIMENSION AND LOADING MODULE** | | | | |
| REQUIREMENT OF STANDARD | COMPLIANCE CODE | CORRECTIVE ACTION REPORT (CAR) | AGREED CLOSEOUT DATE | ACTUAL CLOSEOUT DATE |
| Std 1. Vehicle Loading – Dimension and Safety |  |  |  |  |
| **MASS MANAGEMENT MODULE** | | | | |
| REQUIREMENT OF STANDARD | COMPLIANCE CODE | CORRECTIVE ACTION REPORT (CAR) | AGREED CLOSEOUT DATE | ACTUAL CLOSEOUT DATE |
| Std 1. Vehicle Control |  |  |  |  |
| Std 2. Vehicle Loading - Mass |  |  |  |  |

**ASSESSMENT/AUDIT REPORT**

**OBSERVATIONS AND COMMENTS**

**Summary of Audit findings**

Where the operator named in this report presented the required records and documentation to demonstrate compliance with the criteria and standards at the audit, compliance has been noted with “YES”.

Where the operator named in this report was unable to present the required records and documentation to demonstrate compliance with the criteria and standards at the audit, compliance has been noted with “NO” and a corresponding Corrective Action Request has been raised.

Where the operator named in this report was not required to present records and documentation to demonstrate compliance with the criteria and standards at the audit, compliance has been noted with “NA”.

# COMMON STANDARDS

# Std 1. Responsibilities

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| --- | --- | --- | --- |
| Each Management System must clearly identify the tasks involved, each person involved and their responsibilities during each task with reference to: Dimension and Loading - loading a vehicle and Maintenance and Mass Management- ensuring each nominated fleet vehicle is appropriately maintained. Drivers, managers and schedulers must understand their fatigue responsibility in relation to the hazards and risks, and how these hazards and risks may be managed and controlled. Each person must be competent to undertake the task.  **An operator’s Management Systems must comply with the following criteria:** | | | |
| **CRITERIA** | **REQUIREMENT** | **COMPLIANT YES/NO/NA** | **CAR NO.** |
| **1.1** | Clearly document the tasks in each of the *Management Systems* and who is responsible for carrying out each task, including who is responsible for ensuring each Management System is being maintained and adhered to. |  |  |
| **1.2** | Have written instructions and substantiating documentation to ensure all people assigned to the tasks are suitable for the tasks, appropriately trained and know how to access the written record stating their responsibilities. |  |  |
| **1.3** | Have written instructions to ensure there is a suitable alternative arrangement in place in the event the responsible person is not available to undertake a task. |  |  |

# Std 2. Records and Documentation

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| --- | --- | --- | --- | --- |
| Each *Management System* must contain sufficient records and documentation to verify all Standards have been complied with.  **An operator’s Management Systems must comply with the following criteria:** | | | | |
| **CRITERIA** | **REQUIREMENT** | **COMPLIANT YES/NO/NA** | | **CAR NO.** |
| **2.1** | Have documented evidence of all written instructions, forms, records and policies required under these Standards and demonstrate adherence to these. |  | |  |
| **2.2** | Ensure all required records are legible and identifiable to maintain the vehicle/s, the dimension & loading, mass (where applicable) and fatigue of the vehicle/driver involved. |  | |  |
| **2.3** | Ensure all current documentation is available to all relevant staff at all locations where tasks relating to operations are undertaken. |  | |  |
| **2.4** | Ensure all documents and records be kept for a minimum of 3 years. This includes superseded written instructions. |  | |  |
| **2.5** | Ensure all records and documentation outlined in each standard are retained for each vehicle/trip. |  | |  |
| **2.6** | Ensure copies of intercept reports:   * Are kept for all intercepts; * Demonstrate corrective actions taken if required; and * Considered within the Internal Review. |  | |  |
| **2.7** | Have documentation and records that show an investigation was carried out, including any immediate follow up and long-term remedial action taken for all accidents and incidents reported. |  | |  |
| **2.8** | Ensure the following records and documentation be retained, as a minimum:  **Common Standards** | | | |
| Record of completed Bi-annual (6 monthly) Internal Reviews (must as a minimum include all relevant items from the form in the current Operator Guide). |  |  | |
| A comprehensive training/induction register of all employees/drivers relevant to all modules (where applicable). The register must include as a minimum the following details on each employee/driver:   * Full Name; * Commercial vehicle driver medical assessment date and years valid for; * WA Fatigue Management driver training record and date; * WA Fatigue Management administrator training record and date; and * Driver/Employee training/induction record and date re Maintenance, Fatigue, Dimension & Loading and Mass (where applicable). |  |  | |
| A comprehensive register of all vehicles relevant to all modules (where applicable). The register must include as a minimum the following details for each vehicle:   * Type of vehicle; * Registration number; * Vehicle make; * Year of manufacture; * Date of last roadworthy; * Vehicle Identification Number (VIN); * MGCM; * ATM; * AMMS permit number; * AMMS permit expiry date; * Date added to the register; and * Date removed or sold from the fleet. |  |  | |
| Signed and dated Responsibility Statements should include as a minimum who:   * + - checks calibration records for all weighing equipment are up to date;     - maintains the system and updates the written instructions;     - reviews the training content for all modules and its frequency for refresher training;     - checks all records are legible and identifiable to the driver & vehicle/s;     - completes the bi-annual (6 monthly) internal reviews; and     - checks the forms/data/stats collected in the system match the current Operator Guide where required |  |  | |
| Ensure the following records and documentation be retained, as a minimum:  **Dimension & Loading** | | | |
| D&L checklist and evidence this has been completed for each trip/load (must as a minimum include all relevant items from the form in current Operator Guide). |  |  | |
| Record of the training/induction provided, which must include as a minimum;   * Driver/Employee name; * Training provider name; * Summary/list of subjects included in the training; and * Completion date and any renewal/refresher dates (if applicable). |  |  | |
| Signed and dated Responsibility Statements including as a minimum who:   * + - ensures the vehicle is fit for task;     - positions the load appropriately;     - restrains the load appropriately;     - checks the vehicle and load dimensions (including axle weights);     - ensures an appropriate permit is current, if applicable;     - checks the D&L check has been completed for each trip/load;     - checks the RAV network is approved; and     - ensures compliance with approval conditions. |  |  | |
| Ensure the following records and documentation be retained, as a minimum:  **Maintenance** | | | |
| Daily check is being completed and recorded in accordance with the checklist and written instructions |  |  | |
| Record of the training/induction provided, which must include as a minimum;   * Driver/Employee name; * Training provider name; * Summary/list of subjects included in the training; and * Completion date and any renewal/refresher dates (if applicable). |  |  | |
| Faults occurring on the road are being recorded and reported in accordance with the written instructions. |  |  | |
| Monitoring of faults is recorded in accordance with the written instruction. |  |  | |
| Reported faults are being assessed, repaired and tested in accordance with the set method. |  |  | |
| Maintenance records providing evidence that vehicles are maintained in accordance with the set periodic schedules. |  |  | |
| Record of the qualification and/or training of the person/s maintaining vehicles are suitably qualified or experienced to do so. |  |  | |
| Record of the roadworthy (must as a minimum include all items from the form in current operator guide) per vehicle/equipment – conducted by/within due date. |  |  | |
| Signed and dated Responsibility Statements including as a minimum who:   * + does the daily check;   + checks the daily check has been completed;   + defines the service intervals and tasks;   + monitors the service records are completed on time;   + records and submits vehicle fault/s;   + decides on the fault priorities;   + decides if a fault is to be deferred or monitored;   + ensures the roadworthy carried out and documented meet the minimum requirements and are within the specified timeline; and   + updates the fleet register. |  |  | |
| Ensure the following records and documentation be retained, as a minimum:  **Fatigue** | | | |
| Record of the training/induction provided on correctly completing the company trip sheet and on fatigue, which must include as a minimum;   * Driver/Employee name; * Training provider name; * Summary/list of subjects included in the training; and * Completion date and any renewal/refresher dates (if applicable). |  |  | |
| Documented evidence of each driver’s fatigue training assessment and documented evidence of each administrator’s fatigue training assessment. |  |  | |
| Documented evidence of each driver’s medical assessment. (only the portion that the doctor has signed, dated, stamped and confirming the driver is fit to drive - do not require the entire medical). |  |  | |
| Fit for duty is completed and recorded daily. |  |  | |
| All commercial vehicle drivers have maintained a trip record for all trips. The record must be current, which should mean up until the last non-work period. The driver should complete the record as the trip progresses with breaks noted as they occur. As a minimum trip records must record:   * + work time;   + breaks from driving;   + non-work time;   + drivers full name;   + date;   + start and finish times (trip sheets) for trips with details of any alterations; and   + start and finish locations. |  |  | |
| Completed trip sheets, scheduling of trips and rosters (including full name of driver and expected start and finish times) completed in accordance with the requirements of the WAWHS for commercial vehicle drivers. |  |  | |
| Signed and dated Responsibility Statements including as a minimum who:   * + checks the trip sheet for compliance;   + checks fit for duty is completed daily;   + monitors and ensures medicals are completed prior to expiry;   + does scheduling;   + does rostering;   + ensures and obtains evidence vehicles are ADR42 compliant; and   + ensures workplace conditions assist in the control of fatigue. |  |  | |
| Ensure the following records and documentation be retained, as a minimum:  **Mass Management** | | | |
| Record of the training/induction provided, which must include as a minimum;   * Driver/Employee name; * Training provider name; * Summary/list of subjects included in the training; and * Completion date and any renewal/refresher dates (if applicable). |  |  | |
| Loading plan/s relevant to all load types and combinations. |  |  | |
| Records verifying load plan/s quarterly and/or on change of equipment when an AMMS Approved Weighbridge (as published on the Main Roads Website under the AMMS Approved Weighbridge Supplier Member List) is not part of the loading plan. |  |  | |
| Calibration Certificates (completed as per manufacturer requirements) pallet scales, load cells, weighbridges etc |  |  | |
| Ratings of vehicle/s and equipment. (compliance plate– if vehicle has been modified, record of new compliance plate required) |  |  | |
| Documentation providing an auditable link between:   * The registration details of the vehicles used in the combination; * AMMS permit number recorded per load/trip; * The type/contents of the load carried; and * The masses, or the methodology used to determine axle and gross weight compliance. |  |  | |
| Signed and dated Responsibility Statements including as a minimum who:   * + ensures the weighbridge is on the approved list or obtains current copies of the privately owned weighbridge calibration documentation and dockets when used;   + ensures the quarterly test weighs are completed and records kept (when applicable);   + develops and reviews the load planning documentation;   + maintains the Calibration Certificates for all other loading equipment;   + checks the RAV network is approved for AMMS;   + ensures the vehicle is fit for task;   + obtains and/or renews AMMS permits to ensure they are current; and   + monitors completed documentation (load plans) to verify compliance. |  |  | |

# Std 3. Training and Education

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| --- | --- | --- | --- |
| Each *Management System* must have written instructions to ensure all persons have the appropriate knowledge and skills to undertake required tasks.  **Operator’s Management Systems must comply with the following criteria:** | | | |
| **CRITERIA** | **REQUIREMENT** | **COMPLIANT YES/NO/NA** | **CAR NO.** |
| **3.1** | Have written instructions identifying what training is required for and provided to each person involved in the transport operation, including all drivers, Sub-Contractors, or employees as part of their induction process in relation to each of the modules within the Management Systems, including revisions and updates.  **Fatigue:**  As a minimum, WA WorkSafe administrator online training in relation to Western Australian fatigue management is required for anyone associated with the management, supervision of drivers, including anyone associated with rostering, scheduling and the checking of trip records. As a minimum, drivers can do the WA WorkSafe online driver if they hold no other administrator role or can complete the equivalent Fatigue Management Training that includes a section on the Western Australian commercial vehicle driver hours of work. All training is to include a test of knowledge with a pass requirement. |  |  |
| **3.2** | Have written instructions to ensure the regular review of training needs, the staff responsible and its frequency. |  |  |

# Std 4. Internal Review

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| --- | --- | --- | --- |
| Bi-annual (6 monthly) Internal Reviews of each Management System are required to confirm the ongoing relevance and appropriateness of processes and practices. An effective review will identify any non‑conformances, show failures to comply with written instructions and identify non-compliances which must be actioned accordingly.  **Operator’s Management Systems must comply with the following criteria:** | | | |
| **CRITERIA** | **REQUIREMENT** | **COMPLIANT YES/NO/NA** | **CAR NO.** |

|  |  |  |  |
| --- | --- | --- | --- |
| **4.1** | Have written instructions for carrying out Bi-annual (6 monthly) Internal Reviews which specify the following:   * When the reviews are to take place (Enter the full dates of the reviews on the report); * Who is to conduct the review – name or position (Enter the full name and ensure the review is signed); * How the reviews are to be conducted; and * The checklist of documents and records to be used for the review. (As a minimum the Internal Review must address the minimum criteria contained in the Internal Review within the current Operator Guide) |  |  |
| **4.2** | Separate from the Bi-Annual (6 monthly) Internal Reviews, an operator must have written instructions to ensure all non-conformances identified at any time during the year are corrected. These instructions must include:   * How non-conformances are detected; (What records are being checked) * Who is responsible for detecting them; * Who else should be told about them; * Corrective action to be taken; * Responsibility is allocated to designated staff for correcting all non-conformances; * Timeframes for checking records and reporting identified non-conformances; * How the responsible person is to document the process, so the non-conformance does not recur; and * A non-conformance register detailing all identified non-conformances and the actions taken to correct them. |  |  |

# Std 5. Management of Accidents and Incidents

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| --- | --- | --- | --- |
| A Management System must ensure comprehensive and thorough reporting of all accidents and incidents at the workplace (including on road), including an Internal Review of this process.  **Operator’s Management Systems must comply with the following criteria:** | | | |
| **CRITERIA** | **REQUIREMENT** | **COMPLIANT YES/NO/NA** | **CAR NO.** |
| **5.1** | A written instruction documenting the process for the reporting and recording of accidents and incidents. Evidence these instructions are adhered to (should include the accident/s or incident/s, who was involved, what vehicle type or combination was involved, where did it occur, when and what were the circumstances). |  |  |

**FATIGUE MANAGEMENT MODULE**

# Std 1. Scheduling

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| --- | --- | --- | --- |
| A *Fatigue Management System* must ensure that driver/s are not required to drive unreasonable distances in insufficient time without sufficient notice and adequate rest.  Scheduling must include fatigue management measures where practicable and appropriate pre-trip or forward planning to minimise fatigue. Scheduling practices must not put the delivery of a load before a driver’s safety or health.  **An operator’s Management System must comply with the following criteria:** | | | |
| **CRITERIA** | **REQUIREMENT** | **COMPLIANT YES/NO/NA** | **CAR NO.** |
| **1.1** | Ensure scheduling of trips is in accordance with the requirements of the WAWHS for commercial vehicle drivers. |  |  |
| **1.2** | Ensure driver(s) do not operate outside the approved “Commercial Vehicle Operating Standard” requirements. |  |  |
| **1.3** | A Corrective Action has been taken if it is identified that a driver(s) is continually in non-conformance (breach) of the working hours as set out in the Regulations, that the schedule has been reviewed and adjusted, to ensure the driver(s) do not continue to breach the regulated allowable hours. |  |  |
| **1.4** | Written instructions that explain how flexibility for driver(s) is managed to effectively deal with any unforeseen circumstances that require changes to schedules. |  |  |
| **1.5** | Written instructions that show the same scheduling practices apply to all drivers, including casual, relief, labour hire and Sub-contracted driver(s). |  |  |

# Std 2. Rostering

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| --- | --- | --- | --- |
| A *Fatigue Management System* must ensure rosters and workload meet the commercial vehicle operating standard requirements of the WAWHS for commercial vehicle drivers. This will maximise the opportunity for a driver to recover from the effects or onset of fatigue.  **An operator’s Management System must comply with the following criteria:** | | | |
| **CRITERIA** | **REQUIREMENT** | **COMPLIANT YES/NO/NA** | **CAR NO.** |
| **2.1** | Ensure all drivers work time is in accordance with the WAWHS for commercial vehicle drivers. |  |  |
| **2.2** | Have written instructions that identify the requirements that must be adhered to when preparing rosters. This must include as a minimum, full name of driver/s, start and expected finish times for all trips/days. |  |  |
| **2.3** | Have a written instruction in place that identifies how the trip sheets are checked to ensure:   * Commercial vehicle drivers are complying with the regulations; and * The accuracy of the information provided on the sheets (see WorkSafe WA Safety Alert 01/09) |  |  |
| **2.4** | Have a written instruction in place to ensure that a breach, if detected, does not continue (what action is to be taken regarding the breach, i.e., retraining etc). |  |  |

# Std 3. Fitness for Work

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| --- | --- | --- | --- |
| A *Fatigue Management System* must include requirements to ensure driver/s present themselves in a fit state, to perform their duties safely.  **An operator’s Management System must comply with the following criteria:** | | | |
| **CRITERIA** | **REQUIREMENT** | **COMPLIANT YES/NO/NA** | **CAR NO.** |
| **3.1** | Maintain a comprehensive register of all employees/drivers relevant to this module. |  |  |
| **3.2** | Have a written policy/instruction relating to fitness for work, specifically referring to drugs and alcohol, which contains a statement that “*drivers must present themselves for duty unimpaired by fatigue, alcohol or drugs*” and require that all drivers record this daily. Contain in this written policy/instruction a statement “*that fitness for work as far as is practicable, to be diligently supervised*” any action that will be taken with regards to non-conformances of the instruction. |  |  |
| **3.3** | Have a written instruction on how the operator will manage and control the measures for the recovery and treatment of fatigue, including if a driver becomes fatigued during the trip. |  |  |
| **3.4** | Ensure all drivers must have a current medical assessment in accordance with the current requirements of the WAWHS for commercial vehicle drivers. *Assessing Fitness to Drive* standard as stipulated under WHS Regulation 184D. (3) (a) and (b) is to be used when assessing a driver’s fitness to drive. |  |  |
| **3.5** | Have a system for monitoring their driver’s medical assessments, ensuring they are current and are renewed prior to their expiry date. |  |  |

# Std 4. Workplace Conditions

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| --- | --- | --- | --- |
| A *Fatigue Management System* must ensure that operator’s workplaces comply with the requirements of the *Work Health and Safety (General) Regulations 2022* and the relevant Australian Design Rules (ADR).  **An operator’s Management System must comply with the following criteria:** | | | |
| **CRITERIA** | **REQUIREMENT** | **COMPLIANT YES/NO/NA** | **CAR NO.** |
| **4.1** | Written instructions to ensure facilities are implemented in consultation with drivers to address how the working environment will assist in the prevention of fatigue as far as is practicable. Written instructions must confirm that the vehicle drivers are sleeping in conforms to the requirements of ADR42, if drivers are required, as part of their duties, to sleep in a vehicle when away from their home location. (this includes 2 up operations) and include as a minimum:   * Driver seating; * Driver sleeping facilities; (if overnight relevant) * Depot facilities; (if applicable) and * Air conditioning of driver cabs. (when above 26 parallel) |  |  |

**MAINTENANCE MANAGEMENT MODULE**

# Std 1. Vehicle Control

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| --- | --- | --- | --- |
| Operator must ensure all vehicles in their nominated fleet are identified to ensure they are suitably maintained.  **An operator’s Management System must comply with the following criteria:** | | | |
| **CRITERIA** | **REQUIREMENT** | **COMPLIANT YES/NO/NA** | **CAR NO.** |
| **1.1** | Maintain a comprehensive register of all vehicles relevant to this module (including Sub-Contractor’s vehicles). |  |  |
| **1.2** | Have written instructions to ensure any nominated Sub-Contractor’s vehicles are operating exclusively for the operator. If a Sub-Contractor(s) works for multiple operators, they must be Accredited in their own right. |  |  |

# Std 2. Daily Check

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| The *Maintenance Management System* must include a daily check for each vehicle (includes trailing equipment) when it is in use.  The daily check is a documented written instruction of simple roadworthiness checks. The operator shall define when the inspection is carried out, by whom and how it is recorded. The individual completing the daily check shall acknowledge the vehicle to be roadworthy to the limits of the inspection.  **An operator’s Management System must comply with the following criteria:** | | | |
| **CRITERIA** | **REQUIREMENT** | **COMPLIANT YES/NO/NA** | **CAR NO.** |
| **2.1** | Include a written instruction detailing when the daily check is completed, who carries it out, and how the check is recorded. |  |  |
| **2.2** | Show all vehicles have undergone a daily check (visual check – drivers are not required to get under the vehicles) and this is recorded, which must include as a minimum the inspection of:   * Wheels and tyres for tyre pressure/inflation, tread integrity and wheel security; * All lights and reflectors to ensure fully operational and free of damage; * Windscreen and mirrors for security, damage and grime; * Wipers and windscreen washers to ensure fully operational; * Structure and bodywork to ensure all panels and visible structural members are secure and free of cracks and rust that may affect the vehicle’s structural integrity; * Suspension to ensure no cracks, excessively worn components, free of air leaks (for air suspension) and damaged or leaking shock absorbers; * Engine, gearbox and differential to ensure they are free of any fluid leaks; (including oil, fuel, water, coolant, hydraulic fluid, or other) * Brakes to ensure fully operational, adequately adjusted, and free of leaks. All ABS, EBS, ESC and T-EBS plugs MUST be connected and Systems Operational if present; * Air tanks are free of moisture; and * All tow couplings to ensure security and no excess movement. |  |  |

# Std 3. Fault Recording and Reporting

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| --- | --- | --- | --- |
| An accredited operator must ensure to record all vehicle faults for both the hauling and the trailing equipment. This includes the driver being able to report any recognisable fault that occurs during the course of a journey or at any other time, so it may be assessed and rectified.  **Operator’s Management System must comply with the following criteria:** | | | |
| **CRITERIA** | **REQUIREMENT** | **COMPLIANT YES/NO/NA** | **CAR NO.** |
| **3.1** | Have written instructions to ensure that all vehicle faults (both the hauling and the trailing equipment) are reported to the appropriate person and assessed as soon as possible, including faults found during the daily check and on-road. This must include as a minimum:   * How the driver reports the fault; * Who the driver reports it to; * Who is responsible for assessing the fault; and * Who is responsible for maintaining fault report records. |  |  |

# Std 4. Fault Repair

|  |  |  |  |
| --- | --- | --- | --- |
| Once faults are reported, the *Maintenance Management System* must specify the process for assessing faults and determining the necessary corrective action.  **An operator’s Management System must comply with the following criteria:** | | | |
| **CRITERIA** | **REQUIREMENT** | **COMPLIANT YES/NO/NA** | **CAR NO.** |
| **4.1** | Have written instructions in place to ensure vehicle faults are assessed to determine the severity of a fault and place priority on its repair, including instructions for dealing with vehicles detected as being unsuitable for use, as a result of a serious fault. Clearly identify in this instruction who is responsible for assessing faults and making the decision on the necessary corrective action, including if a decision is made to monitor a fault and/or defer repairs. |  |  |
| **4.2** | Ensure where a decision is made to monitor the condition of a fault, have a written instruction in place providing the reasoning for the decision and specifying when the fault is to be re-assessed. |  |  |
| **4.3** | Have a written instruction in place to ensure faults have been rectified and tested. |  |  |

# Std 5. Maintenance Schedules and Methods

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| --- | --- | --- | --- |
| The *Maintenance Management System* must specify the maintenance schedules for each vehicle (both the hauling and the trailing equipment) to ensure they are systematically maintained and remain roadworthy.  **An operator’s Management System must comply with the following criteria:** | | | |
| **CRITERIA** | **REQUIREMENT** | **COMPLIANT YES/NO/NA** | **CAR NO.** |
| **5.1** | Have a scheduled service that includes a roadworthy inspection of the vehicles, signed by a qualified person declaring the vehicle roadworthy. If the service is older than twelve months from the date of audit or none is available, then operators must complete an *Accreditation Roadworthy Vehicle Checklist* which can be found on the Accreditation page of the Main Roads website. All entries must include the date each vehicle was inspected and the name of the person who conducted the inspection. A qualified person at the workplace must sign the checklist, certifying the information is correct. |  |  |
| **5.2** | Clearly identify maintenance schedules for each vehicle to ensure all components are maintained in accordance with manufacturer’s specifications/recommendations, intervals of time, distance, or hours of use and RTVR and ADR requirements. Schedules must include a description of the tasks to be completed during each service based on vehicle type. If a vehicle is on a *Flexible Service Agreement*, the operator must provide evidence of this agreement per vehicle. |  |  |
| **5.3** | Ensure maintenance and repairs are only undertaken by person/s having suitable qualifications or experience to competently complete any maintenance or repair tasks or do so under suitable supervision. |  |  |

# DIMENSION & LOAD MANAGEMENT MODULE

# Std 1. Vehicle Loading – Dimension and Safety

|  |  |  |  |
| --- | --- | --- | --- |
| The *Load Management System* must document the methodology used to ensure vehicles are loaded within allowable dimension limits and in a safe manner. The methodology must also ensure loads are adequately restrained and vehicle stability is managed.  **An operator’s Management System must comply with the following criteria:** | | | |
| **CRITERIA** | **REQUIREMENT** | **COMPLIANT YES/NO/NA** | **CAR NO.** |
| **1.1** | Have written instructions in place for ensuring vehicle dimensions, including its load, are within allowable limits prior to the vehicle travelling on a public road. Specify how the dimension and loading checks are completed and what record is kept. |  |  |
| **1.2** | Have written instructions to ensure the proposed route is approved for the vehicle combination, that all vehicles have the required authorisations (i.e., registrations, licenses, permits or order) to operate on the public road network and relevant staff/Sub-Contractors are aware of these conditions. |  |  |
| **1.3** | Have written instructions to ensure standard mass requirements are not exceeded. |  |  |
| **1.4** | Have written instructions for dealing with vehicles detected as being over the allowable dimension limit to ensure they are rectified prior to the vehicle travelling on the public road. |  |  |
| **1.5** | Have written instructions to ensure loads are adequately restrained and/or contained, in accordance with the current *Load Restraint Guide*. |  |  |
| **1.6** | Have written instructions in place for managing the rollover risk of the vehicle specific to the operators’ transport task. |  |  |

# MASS MANAGEMENT MODULE

# Std 1. Vehicle Control - Mass

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| --- | --- | --- | --- |
| Operators must ensure all vehicles operating under AMMS meet the technical specifications required for the relevant higher mass limits.  **An operator’s Management System must comply with the following criteria:** | | | |
| **CRITERIA** | **REQUIREMENT** | **COMPLIANT YES/NO/NA** | **CAR NO.** |
| **1.1** | Have a comprehensive register of all vehicles operating under AMMS (including Sub-Contractor(s) vehicles). |  |  |
| **1.2** | Ensure all vehicles have sufficient ratings to conform to the authorised higher mass limits and the required authorisations (i.e., licenses, permits or order) are in place to operate under AMMS, prior to operating on the public road network. |  |  |
| **1.3** | Ensure any nominated subcontractor(s) vehicles are operating exclusively for the operator. If a Sub-Contractor wishes to work for others, they must be Accredited in their own right. |  |  |

# Std 2. Vehicle Loading - Mass

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| The *Mass Management System* must be able to ensure vehicles are loaded within allowable mass limits. Before the vehicle departs, it must have its weight assessed to ensure it is not exceeding the allowable mass.  The methodology must be able to allow for normal variations of the product and still ensure all mass requirements are met. The loading system must control vehicle loadings within the allowable limits, prior to the vehicle travelling on the road.  **An operator’s Management System must comply with the following criteria:** | | | |
| **CRITERIA** | **REQUIREMENT** | **COMPLIANT YES/NO/NA** | **CAR NO.** |
| **2.1** | Have written instructions on how the loading method is capable of controlling the vehicle’s gross mass and load distribution across axle groups as shown in *Appendix 1*. Specify how mass is recorded and where the records are kept for each trip. |  |  |
| **2.2** | Have written instructions defining the process for dealing with vehicles detected as being overloaded and how any variations such as load density, temperature, size variations etc., will be controlled. |  |  |
| **2.3** | Provide documentary evidence of certification that any devices used for establishing mass or volumes have been appropriately calibrated in accordance with manufacturer’s specifications, or National Measurement Institute (NMI) regulatory requirements. |  |  |
| **2.4** | Ensure all necessary approvals (permits, exemptions, orders etc.) have been obtained and the AMMS proposed route is approved for the vehicle combination on the RAV network and staff/drivers are aware of these conditions. |  |  |

CORRECTIVE ACTION REQUEST

|  |  |  |  |
| --- | --- | --- | --- |
| **OPERATOR NAME** |  | **OPERATOR NUMBER** |  |

***Operator could not supply evidence of compliance as required by the following Standard Criteria at time of audit.***

***(Refer to ASSESSMENT/AUDIT REPORT OBSERVATIONS AND COMMENTS Section).***

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **CORRECTIVE ACTION NO.** | **MODULE**  (\* See Key) | **CRITERIA NO.** | **DETAILS OF OBSERVED NON-CONFORMANCE** | **CORRECTIVE ACTION REQUIRED** | **CORRECTIVE ACTION TAKEN**  (To be completed by Auditor) |
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\*Insert additional lines as required

***Operator is required to supply evidence of compliance by agreed date.***

|  |  |  |  |
| --- | --- | --- | --- |
| **AGREED CLOSE OUT DATE** |  | **CARS CLOSED OUT DATE** |  |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Signed Operator Representative Name** | Name:  Signature: | **Position** |  | **Date** |  |
| **Auditor Acceptance** | Name:  Signature: | **Auditor Cert No.** |  | **Date** |  |

MODULE KEY

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| D&L = Dimension & Loading | CS = Common Standards | Maint = Maintenance | MASS = Mass | FM = Fatigue |

EMPLOYEE / DRIVER NAMES REGISTER

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **Employee/ Driver Name** | **Medical Certificate Date /**  **Years Valid For** | | **WA Fatigue Management Training Records & Last Completed Date** | | **Dates of Training / Induction Completed for**  **Maintenance, D&L, Mass, Fatigue, and System Management Standards. Maintenance qualifications.** | **Date Employment Ceased** |
| **Administrator** | **Driver** |
|  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |

EMPLOYEE / DRIVER NAMES OF RECORDS EXAMINED

**(Audit Sampling of Records Examined)**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Employee/ Driver Name** | **Trip Sheet Date Range** | **Fit For Work**  **(Yes/No)** | **Daily Vehicle Checks Yes/No** | **Dimension and Load Checks Yes/No** |
|  |  |  |  |  |
|  |  |  |  |  |

\*Insert additional lines as required

VEHICLE REGISTER

**Green columns only required for vehicles operating under the**

**Mass Management Module**

|  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Vehicle Type- PM/T/D** | **Vehicle Reg.** | **Vehicle Make** | **Year** | **Last**  **Roadworthy Date** | **Vin / Chassis No.** | **Manufacturers GCM Rating** | **ATM Rating** | **AMMS / PBS Permit #** | **AMMS / PBS Permit Expiry Date** | **Date Added to List** | **Date Removed from List** |
|  |  |  |  |  |  |  |  |  |  |  |  |
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\*Insert additional lines as required

VEHICLE REGISTRATION NUMBERS OF RECORDS EXAMINED

**(Audit Sampling of Records Examined)**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Vehicle Reg.**  **No.** | **Maintenance & Service Records** | **Fault Recording /**  **Reporting / Repair** | **AMMS Records Date Range** | **AMMS Load Plan / Quarterly Test Weigh (If applicable) Verified – Yes / No** |
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\*Insert additional lines as required

SUB-CONTRACTOR & THIRD PARTY OPERATOR INFORMATION – WORKING UNDER THIS OPERATORS ACCREDITATION

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **Sub-Contractor / Third Party operator legal entity name** | **Dates of Employment**  **From / To** | **Vehicle Owner** | **Vehicle Type (P Mover / Trailer / Dolly)** | **Vehicle Registration** | **Last**  **Roadworthy**  **Date** | **WAHVA Business Rules Clause 3.8 Compliance**  **Yes/No** |
|  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |

\*Insert additional lines as required

**NOTES & OTHER INFORMATION PERTAINING TO THE OPERATORS WESTERN AUTRALIAN HEAVY VEHICLE ACCREDITATION**

OPERATOR DECLARATION

I hereby acknowledge that all details in this Audit Report and all the information provided within or as supporting documentation are true and correct. I have read and understand, the conditions applicable to the Western Australian Heavy Vehicle Accreditation Scheme, including the Business Rules and Standards.

**OPERATOR SIGNATURE \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ DATE \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

|  |  |
| --- | --- |
| NAME | POSITION |

AUDITOR DECLARATION

|  |  |  |
| --- | --- | --- |
| **AUDITOR NAME** | **AUDIT CERTIFICATION ID** | **EXPIRY DATE** |
|  |  |  |

As an Auditor currently registered with Main Roads WA, to conduct audits for the Western Australian Heavy Vehicle Accreditation Scheme, I hereby certify

|  |  |
| --- | --- |
|  | OPERATOR LEGAL ENTITY NAME |

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** (please state “does” or “does not”) meet all requirements of accreditation for the modules and vehicles described in this report as assessed against the standards for each module

I certify this audit has been conducted in accordance with the requirements of the Western Australian Heavy Vehicle Accreditation Business Rules, Western Australian Heavy Vehicle Accreditation Process Guidelines for Audit Providers and Standards for the applicable modules.

**AUDITOR SIGNATURE \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ DATE \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**