GTL INTERMODAL is committed to upholding safe workplace free of drug and alcohol misuse. Any location in which GTL INTERMODAL conducts business, whether on GTL INTERMODAL owned property, in GTL INTERMODAL owned or leased vehicle(s), a customer's place of business or any location at which business of GTL INTERMODAL is conducted is designated a drug and alcohol-free workplace.

This policy follows DOT and FMCSA regulations found in **49 CFR Parts 40 and 382**. If you have questions about this controlled substances and alcohol testing policy, contact the designated GTL INTERMODAL representative to answer questions about this policy. GTL INTERMODAL has appointed, as its designee:

| NAME: | Riley Gettis Jr |
|-----------|-----------------|
| LOCATION: | South Carolina |
| PHONE: | 803-571-8891 |

All drivers who operate Commercial Motor Vehicles (CMV) which require a Commercial Driver's License are subject to controlled substances and alcohol testing. This policy applies to all GTL INTERMODAL employee drivers or leased/contracted drivers and all other persons who perform Safety Sensitive Functions or operate under the US DOT Motor Carrier Authority of GTL INTERMODAL. Any person performing a safety sensitive function is deemed to have consented to all controlled substance testing as mandated by any State or jurisdiction in the enforcement of 49 CFR Part 382.

Controlled Substance Testing includes, but may not be limited to, the following substances: Marijuana, Opiates, Amphetamines, Methamphetamines, Cocaine, Heroin, Phencyclidine, and MDMA/Ecstasy. Many types of prescribed pharmaceuticals are prohibited substances. Please check with your designated GTL INTERMODAL representative for information if you are taking a prescription medication which may be prohibited. All DOT controlled substance testing and alcohol documentation, including questions asked and information provided by the designated GTL INTERMODAL representative are CONFIDENTIAL and will be maintained in a PRIVATE and CONFIDENTIAL manner at GTL INTERMODAL

The definition of driver Safety Sensitive Function is found at **49 CFR Section 382.107** (attached) Safety sensitive function means: all times from the time a driver begins to work or is required to be ready to work until the time he/she is relieved from work and all responsibility for performing work has concluded. GTL INTERMODAL has determined that for ease of understanding, it considers all driver personnel Safety Sensitive Function workdays to include One Hour prior to beginning the work day.

Safety Sensitive Functions shall include:

- 1. All times at an employer or shipper plant, terminal, facility, or other property, or on any public property, waiting to be dispatched, unless the driver has been relieved from duty by the employer;
- 2. All times inspection equipment as required by **49 CFR Sections 392.7** and **392.8**, or otherwise inspecting, servicing, or conditioning any commercial motor vehicle at any time;
- 3. All times spent at the driving controls of a commercial motor vehicle in operation;
- 4. All times, other than driving time, in or upon a commercial motor vehicle except time spent resting in a sleeper berth, (requirements for sleeper berth are found at **49 CFR Section 393.76**);
- 5. All times loading or unloading a vehicle, supervising or assisting in the loading or unloading, attending a vehicle being loaded or unloaded, remaining in readiness to operate the vehicle or in giving or receiving receipts for shipments loaded or unloaded; and
- 6. All times repairing, obtaining assistance, or remaining in attendance upon a disabled vehicle.

Prohibited Conduct:

Driver Conduct that is prohibited is found at 49 CFR Part 382, Subpart B (Table 1) and includes the following:

Table 1

382.201 No driver shall report for duty requiring the performance of a safety sensitive function with an alcohol concentration of **0.04** or greater.

382.205 No driver shall use alcohol while performing a safety sensitive function.

382.207 No driver required to take a post-accident alcohol test under **49 CFR 382.209** shall use alcohol for 8 hours following the accident.

382.211 No driver shall refuse to submit any required alcohol or controlled substances test.

382.213 No driver shall report for duty requiring the performance of a safety sensitive function when the driver uses controlled substances, except when the use is pursuant to the instructions of a licensed medical practitioner, as defined in **49 CFR 382.107**. This must not interfere with the driver's ability to perform a safety sensitive function.

382.215 No driver shall report for duty or remain on duty requiring the performance of a safety sensitive function if the driver tests positive for controlled substances.

The circumstances which prompt driver testing are incorporated herein and found at 49 CFR Part 382 Subpart C (Table 2):

Table 2

| 382.301 Pre-employment testing | 382.307 Reasonable Suspicion testing |
|---|---|
| 382.303 Post-Accident testing | 382.309 Return to Duty testing |
| 382.305 Random testing, per the prevailing rate as | 382.311 Follow-Up testing |
| required by U.S. DOT | |

No driver tested under the provisions of subpart C of this part (Section 382) and found to have an alcohol concentration of **0.02** or greater, but less than **0.04** shall perform or continue to perform safety sensitive functions, including driving a commercial motor vehicle, nor shall he/she be permitted to perform or continue to perform safety sensitive functions, until the start of the driver's next regularly schedule duty period, but in any event not less than 24 hours following administration of the test. Any alcohol test result with a concentration of **0.02** or above is subject to disciplinary review by GTL INTERMODAL

All definitions, regulations and procedures used to test for controlled substances and alcohol, to protect the integrity of the testing process, safeguard test validity, and ensure results are attributed to the correct driver, are found in **49 CFR Parts 40 and 382**. They are incorporated into this policy by reference and attached, hereto.

The Federal Motor Carrier Safety Regulations specify that when a driver is involved in an accident, he/she must submit to post-accident drug and alcohol testing as soon as reasonably possible, whenever there is a human fatality, or when the driver is issued a citation by law enforcement, AND there is bodily injury of a person requiring immediate medical treatment away from the scene, or there is disabling damage to a motor vehicle involved in the accident requiring a tow from the scene. (49 CFR Part 382.303) You must contact your designated GTL INTERMODAL representative as soon as reasonably possible after an accident if you have a question about whether post-accident testing is required. Drivers required by a scene commander or legal authority at the accident scene, to undergo post-accident testing following an accident must comply regardless of the above definitions. Failure to do so constitutes a refusal to test. Where not otherwise commanded by law enforcement, GTL INTERMODAL will require said driver to submit to post accident screening as required by 49 CFR Part 382.303. Your GTL INTERMODAL designated representative has additional information on what happens when post-accident testing cannot be performed within the required timeliness.

Refusal to submit to required controlled substance or alcohol testing is in direct violation of Federal Motor Carrier Safety Regulations and the policy set forth by GTL INTERMODAL No excuse, when instructed to report for or submit to testing, is acceptable. Failure to be available for testing will be construed as a refusal to testing the Federal

Motor Carrier Safety Regulations, a refusal to test is equivalent to a positive test result. A positive test result is subject to disciplinary review by GTL INTERMODAL

Refusal of a driver to submit to an alcohol or controlled substances test is defined in 49 CFR 382.107 (Table 3):

Table 3

To refuse to submit (to an alcohol or controlled substances test) means that a driver:

- 1. Fails to appear for any test (except a Pre-employment test) within a reasonable time, as determined by the employer, consistent with applicable DOT agency regulations, after being directed to do so by the employer. This includes the failure of an employee (including an owner operator) to appear for a test when called by a C/TPA;
- 2. Fails to remain at the testing site until the testing proceeds are complete. Provided, that an employee who leaves the testing site before the testing process commences on a pre-employment test is not deemed to have refused to test;
- 3. Fails to provide a urine specimen for any drug test required by this part or DOT agency regulations. Provided, that an employee who does not provide a urine specimen, because he or she has left the testing site before the testing process commences on a pre-employment test is not deemed to have refused to test;
- 4. (In the case of a directly observed or monitored collection in a drug test,) fails to permit the observation or monitoring of the driver's provision of a specimen;
- 5. Fails to provide a sufficient amount of urine specimen when directed, and it has been determined that there was no adequate medical explanation for the failure;
- 6. Fails or declines to take a second test the employer or the collector has directed the driver to take;
- 7. Fails to undergo a medical examination or evaluation, as directed by the MRO as part of the verification process, or as directed by the DER under **49 CFR 40.193(d).** In the case of a pre-employment drug test, the employee is deemed to have refused to test on this basis only if the pre-employment test is conducted following a contingent offer of employment;
- 8. Fails to cooperate with any part of the testing process (e.g., refuse to empty pockets when so directed by the collector, behave in a confrontational way that disrupts the collection process); or
- 9. Is reported by the MRO as having a verified adulterated or substituted test result.

Note: In reference to item 1 for the FMCSA: "Immediate" means that the employer shall ensure the driver ceases to perform the safety sensitive function and proceeds to the testing site as soon as possible.

The consequences for violators of Subpart B are incorporated and found in 49 CFR Part 382 Subpart E (Table 4):

Table 4

All CDL drivers will be removed from any safety sensitive position.

The driver must see a Substance Abuse Professional to ever drive again, anywhere.

The driver must take a Return to Duty test with a Negative result and/or an Alcohol test with results below 0.02.

You can find a list of substance abuse professionals at the following website URL: https://www.naadac.org/sap-directory?locsearch=22314&loccountry=US&locdistance=25&sortdir=distance-asc

Search and Seizure:

GTL INTERMODAL has the right to conduct an on the spot search and inspection of personnel on company property, their personal property and effects, to include, but not be limited to: Lockers, baggage, offices, desks, tool boxes, clothing, personal storage containers, medicine containers, and vehicles to determine if such personnel may be using, possessing, selling, distributing, concealing, manufacturing, dispensing or transporting any controlled substance.

In the event a driver presents signs of being under the influence of a controlled substance or alcohol, he/she will be taken to a DOT collection site for testing. Reasonable suspicion screening will be conducted when signs of being under the influence are personally observed and can be reasonably articulated as to what behaviors are being observed. This is known as a "Contemporaneous and Articulable" policy. Documentation must be completed by GTL INTERMODAL as a witness report. At least one witness to the behaviors presented must be a trained supervisor.

A positive controlled substance or alcohol test will result in immediate removal from all safety sensitive functions. The driver will receive referral information to qualified substance abuse professionals in their domiciled area. GTL INTERMODAL reserves the right to discipline or immediately terminate the employment or contract of any driver following a positive drug or alcohol test.

This policy was written in September 2017

Intervening when a drug or alcohol problem is suspected

| GTL INTERMODAL, requests that any signs of GTL INTERMODAL DER noted in our Busines | or symptoms of drug use or alcohol abuse be reported to the to tess Roles and Responsibilities. | the |
|--|--|----------|
| Schedules of Controlled Substance Policy | | |
| Approved by | | |
| , | | |
| Controlled | Receipt of GTL INTERMODAL Substance Policies/Procedures and Appendix A | |
| Driver/Associate Name: | | |
| I,Policies and Procedures and Appendix A (<i>re</i> | , have received a copy of GTL INTERMODAL - Controlled Sevision September 2017). | ubstance |
| | s initiated under the following circumstances: Pre-employment Ts selected by a third-party administrator, Post Accident Testing (§382.303(d)). | _ |
| Driver Signature | Date | |
| Received by Signature | | |
| | | |
| | | |

This amendment is intended to help drivers understand the personal consequences of substance abuse.

ALCOHOL

Although used routinely as beverage for enjoyment, alcohol can also have negative physical and mood-altering effects when abused. These physical or mental alterations in a driver may have serious personal and public safety risks.

Health Effects

An average of three or more servings per day of beer (12 oz.), whiskey (1 oz.), or wine (6 oz.) over time, may result in the following health hazards:

- Dependency
- Fatal liver disease
- Kidney disease
- Pancreatitis
- Ulcers
- Decreased sexual functions
- Increased cancers of the mouth, tongue, pharynx, esophagus, rectum, breast, and malignant melanoma
- Spontaneous abortion and neonatal mortality
- Birth defects

Social Issues

- 2/3 of all homicides are committed by people who drink prior to the crime.
- 2% 3% of the driving population are legally drunk at any one time. This rate doubles at night and on weekends.
- 2/3 of all Americans will be involved in an alcohol-related vehicle accident during their lifetime.
- The separation and divorce rate in families with alcohol dependency problems is 7 times the average.
- 40% of family court cases are alcohol-related.
- Alcoholics are 15 times more likely to commit suicide.
- More than 60% of burns, 40% of falls, 69% of boating accidents, and 76% of private aircraft accidents are alcoholrelated.
- Over 17,000 fatalities occurred in 1993 in highway accidents, which were alcohol-related. This was 43% of all highway fatalities.
- 30,000 people will die each year from alcohol caused liver disease.
- 10,000 people will die each year due to alcohol-related brain disease or suicide.
- Up to 125,000 people die each year due to alcohol-related conditions or accidents.

Workplace Issues

- It takes one hour for the average person (150 pounds) to process one serving of alcohol from the body.
- Impairment can be measured with as little as two drinks in the body.
- A person who is legally intoxicated is 6 times more likely to have an accident than a sober person.

Alcohol's Trip Through the Body

- Mouth and Esophagus: Alcohol is an irritant to the delicate linings of the throat and food pipe. It burns as it goes down.
- Stomach and Intestines: Alcohol has an irritating effect on the stomach's protective lining, resulting in gastric or duodenal ulcers. This condition, if it becomes acute, can cause peritonitis, perforation of the stomach wall. In the small intestine, alcohol blocks absorption of such substances as thiamine, folic acid, fat, vitamin B1, vitamin B12, and amino acids.
- Bloodstream: 95% of the alcohol taken into the body is absorbed into the bloodstream, through the lining of the stomach and duodenum. Once in the bloodstream, alcohol quickly goes to every cell and tissue in the body. Alcohol causes red blood cells to clump together in sticky wads, slowing circulation and depriving tissues of oxygen. It also causes anemia by reduction of red blood cell production. Alcohol slows the ability of white cells to engulf and destroy bacteria and degenerates the clotting ability of blood platelets.

- Pancreas: Alcohol irritates the cells of the pancreas, causing them to swell, thus blocking the flow of digestive enzymes. The chemicals, unable to enter the small intestine, begin to digest the pancreas, leading to acute hemorrhagic pancreatitis. One out of five patients who develop this disease dies during the first attack. Pancreatitis can destroy the pancreas and cause a lack of insulin thus resulting in diabetes.
- Liver: Alcohol inflames the cells of the liver, causing them to swell and block the tiny canal to the small intestines. This prevents bile from being filtered properly through the liver. Jaundice develops, turning the whites of the eyes and skin yellow. Each drink of alcohol increases the number of live cells destroyed, eventually causing cirrhosis of the liver. The disease is eight times more frequent among alcoholics than among nonalcoholic persons.
- Heart: Alcohol causes inflammation of the heart muscle. It has a toxic effect on the heart and causes increased amounts of fat to collect, thus disrupting its normal metabolism.
- *Urinary Bladder and Kidneys*: Alcohol inflames the lining of the urinary bladder, making it unable to stretch properly. In the kidneys, alcohol causes increased loss of fluids through its irritating effect.
- Sex Glands: Swelling of the prostate gland caused by alcohol interferes with the ability of the male to perform sexually. It also interferes with the ability to climax during intercourse.
- Brain: The most dramatic and noticed effect of alcohol is on the brain. It depresses brain centers, producing progressive in coordination: confusion, disorientation, stupor, anesthesia, coma, death. Alcohol kills brain cells and brain damage is permanent. Drinking over time causes loss of memory, judgment and learning ability.

DRUGS

Marijuana

Health Effects

- Emphysema-like conditions.
- One joint of marijuana contains cancer-causing substances equal to 1/2 pack of cigarettes.
- One joint can cause the heart to race and be overworked. People with heart conditions are at risk.
- Marijuana is commonly contaminated with the fungus Aspergillus, which can cause serious respiratory tract and sinus infections.
- Marijuana lowers the body's immune system response, making users more susceptible to infection.
- Chronic smoking causes changes in brain cells and brain waves. The brain does not work as efficiently or effectively. Long-term brain damage may occur.
- Tetrahydrocannabinol (THC) and 60 other chemicals in marijuana concentrate in the ovaries and testes.
- Chronic smoking of marijuana in males causes a decrease in testosterone and an increase in estrogen, the female hormone. As a result, the sperm count is reduced, leading to temporary sterility.
- Chronic smoking of marijuana in females causes a decrease in fertility.
- A higher than normal incidence of stillborn births, early termination of pregnancy, and higher infant mortality rate during the first few days of life are common in pregnant marijuana smokers.
- THC causes birth defects including brain damage, spinal cord, forelimbs, liver, and water on the brain and spine in test animals.
- Prenatal exposure may cause underweight newborn babies.
- Fetal exposure may decrease visual functioning.
- User's mental function can display the following effects:
 - Delayed decision making
 - Diminished concentration
 - Impaired short-term memory
 - Impaired signal detection
 - Impaired tracking
 - Erratic cognitive function
 - Distortion of time estimation

Workplace Issues

- THC is stored in body fat and slowly released.
- Marijuana smoking has long-term effects on performance.
- Increased THC potency in modern marijuana dramatically compounds the side effects.
- Combining alcohol or other depressant drugs with marijuana increases the impairing effects of both. Cocaine Used
 medically as a local anesthetic. When abused, it becomes a powerful physical and mental stimulant. The entire
 nervous system is energized. Muscles tense, heart beats faster and stronger, and the body burns more energy.
 The brain experiences an exhilaration caused by a large release of necrohormones associated with mood
 elevation.

Cocaine

Health Effects

- Regular use may upset the chemical balance of the brain. As a result, it may speed up the aging process by causing damage to critical nerve cells. Parkinson's Disease could also occur.
- Cocaine causes the heart to beat faster, harder, and rapidly increases blood pressure. It also causes spasms of blood vessels in the brain and heart. Both lead to ruptured vessels causing strokes and heart attacks.
- Strong dependency can occur with one "hit" of cocaine. Usually mental dependency occurs within days for "crack" or within several months for snorting coke. Cocaine causes the strongest mental dependency of all the drugs.
- Treatment success rates are lower than other chemical dependencies.
- Extremely dangerous when taken with other depressant drugs. Death due to overdose is rapid. Fatal effects are usually not reversible by medical intervention.

Workplace Issues

- Extreme mood and energy swings create instability. Sudden noise causes a violent reaction.
- Lapses in attention and ignoring warning signals increases probability of accidents.
- High cost frequently leads to theft and/or dealing.
- Paranoia and withdrawal may create unpredictable or violent behavior.
- Performance is characterized by forgetfulness, absenteeism, tardiness, and missing assignments.

Opiates

Narcotic drugs which alleviate pain and depress body functions and reactions.

Health Effects

- IV needle users have a high risk of contracting hepatitis or AIDS when sharing needles.
- Increase pain tolerance. As a result, a person may more severely injure themselves and fail to seek medical attention as needed.
- Narcotic effects are multiplied when combined with other depressants causing an increased risk for an overdose.
- Because of tolerance, there is an ever-increasing need for more.
- Strong mental and physical dependency occurs.
- With increased tolerance and dependency combined, there is a serious financial burden for the users.

Workplace Issues

- Side effects such as nausea, vomiting, dizziness, mental clouding and drowsiness place the user at high risk for an accident.
- Causes impairment of physical and mental functions.

Amphetamines

Central nervous system stimulant that speeds up the body and mind.

Health Effects

- Regular use causes strong psychological dependency and increased tolerance.
- High doses may cause toxic psychosis resembling schizophrenia.
- Intoxication may induce heart or brain damage due to severe constriction of capillary blood vessels.
- Euphoric stimulation increases impulsive and risk-taking behavior, including bizarre and violent acts.
- Withdrawal may result in severe physical and mental depression.

Workplace Issues

- Since the drug alleviates the sensation of fatigue, it may be abused to increase alertness during periods of overtime or failure to get rest.
- With heavy use or increasing fatigue, the short-term mental or physical enhancement reverses and becomes an impairment.

Phencyclidine (PCP)

Often used as a large animal tranquilizer. Abused primarily for its mood-altering effects. Low doses produce sedation and euphoric mood changes. Mood can rapidly change from sedation to excitation and agitation. Larger doses may produce a coma-like condition with muscle rigidity and a blank stare. Sudden noises or physical shocks may cause a "freak out" in which the person has abnormal strength, violent behavior, and an inability to speak or comprehend.

Health Effects

- The potential for accidents and overdose emergencies is high due to the extreme mental effects combined with the anesthetic effect on the body.
- PCP, when combined with other depressants, including alcohol, increases the possibility of an overdose.
- If misdiagnosed as LSD induced, and treating with Thora zine, can be fatal.
- Irreversible memory loss, personality changes, and thought disorders may result.

Workplace Issues

- Not common in workplace primarily because of severe disorientation that occurs.
- There are four phases of PCP abuse:
 - 1. Acute toxicity causing combativeness, catatonia, convulsions, and coma. Distortions of size, shape, and distorted perception are common.
 - 2. Toxic psychosis with visual and auditory delusions, paranoia and agitation.
 - 3. Drug induced schizophrenia.
 - 4. Induced depression which may create suicidal tendencies and mental dysfunction

MOBILE COMMUNICATIONS POLICY

GTL INTERMODAL is committed to giving drivers information on safe operation of CMVs. GTL INTERMODAL expects all drivers to use or refrain from using mobile or electronic devices according to the circumstances of their environment. GTL INTERMODAL and its drivers cannot control the actions of other drivers on the road, but we want to be observant so that we can avoid adverse safety events whenever reasonably possible.

It is GTL INTERMODAL'S policy that a CMV driver, while a commercial motor vehicle is in motion, i.e., when it is moving forward or temporarily stationary because of traffic, traffic control devices, or other momentary delays, may not hold a mobile device to make a call, or enter commands by pressing more than a single button; nor may a CMV driver view or send text messages.

CMV drivers who use a mobile phone while driving can only use a device in hands-free mode which is in close proximity. Hands-free mode can include Bluetooth or other enabled devices which are worn on the head or neck and operated by touch control or voice control. If you have questions about whether your hands-free device is sufficient to meet the GTL INTERMODAL'S policy, please check with your supervisor. A mounted phone is acceptable if it is mounted within a relaxed arm's reach of the driver. To comply with this policy, a driver must have his or her mobile telephone located where he/she is able to initiate, answer, or terminate a call by touching a single button and without having to press another button to hear the caller. The driver must be in the seated driving position and properly restrained by a seat belt. Drivers are not in compliance if they unsafely reach for a mobile phone, even if they intend to use the hands-free function.

"Use" of a hand-held mobile telephone means using at least one hand to hold a mobile phone to make a call; dialing a mobile phone by pressing more than a single button; or reaching for a mobile phone in a manner that requires a driver to maneuver so that he or she is no longer in a seated driving position, restrained by a seat belt.

"Text messages" means manually entering text (words) into, or reading text from, an electronic device. Texting includes (but is not limited to), short message services, e-mailing, instant messaging, a command or request to access a Web page, pressing more than a single button to initiate or terminate a call using a mobile telephone, or engaging in any other form of electronic text retrieval or entry, for present or future communication.

By my signature below, I certify that I have read the above policies and agree to abide by them while I am an employee

| Receipt of GTL INTERMODAL Mobile Communication Policy | | | | |
|---|---|--|--|--|
| I,Communication Policy (revision September 2017). | , have received a copy of GTL INTERMODAL 's, Mobile | | | |
| Driver/Associate Signature | Date | | | |
| Received by Signature: | Title | | | |

HOURS OF SERVICE POLICY AND PROCEDURES

GETTIS TRUCKING LLC intends to maintain compliance with applicable US DOT regulatory requirements, including those concerning a Driver's Record of Duty Status.

Any CMV driver operating under GTL INTERMODAL motor carrier operating authority must comply with all Hours of Service rules found in **49 CFR Part 395**. In addition, all drivers must:

 Retain necessary documentation to support the Record of Duty status, such as fuel receipts, meal receipts, bills of lading, carrier pro forma invoices or waybills, credit and debit card receipts, customs declarations, delivery receipts, dispatch and assignment records, expense vouchers, freight bills, fuel billing statements, toll receipts, weight scale tickets, and other similar support, where location, date and time information are pre-printed or available on the record.

ELECTRONIC LOGGING DEVICES (ELD):

- 1. Follow all guidelines as established for permissible use of ELDs and keep the equipment in working order both for daily logging operations as well as availability to law enforcement upon request.
- 2. No driver may disable, deactivate, disengage, jam, or otherwise block or degrade a signal transmission or reception, or reengineer, reprogram, or otherwise tamper with an automatic on-board recording device or ELD so that the device does not accurately record and retain required data.
- 3. No driver may permit or require another person to disable, deactivate, disengage, jam, or otherwise block or degrade a signal transmission or reception, or reengineer, reprogram, or otherwise tamper with an automatic onboard recording device or ELD so that the device does not accurately record and retain required data

ELD MALFUNCTIONS AND DATA DIAGNOSTIC EVENTS

- 1. Recordkeeping during ELD malfunctions. In case of an ELD malfunction, a driver must do the following:
 - a. Note the malfunction of the ELD and provide written notice of the malfunction to GETTIS TRUCKING LLC within 24 hours:
 - b. Reconstruct the record of duty status for the current 24-hour period and the previous 7 consecutive days, and record the records of duty status on graph-grid paper logs that comply with §395.8, unless the driver already possesses the record, or the records are retrievable from the ELD; and
 - c. Continue to manually prepare a record of duty status in accordance with §395.8 until the ELD is serviced and brought back into compliance with this subpart.
- 2. Inspections during malfunctions. When a driver is inspected for hours of service compliance during an ELD malfunction, the driver must provide the authorized safety official the driver's records of duty status manually kept as specified under paragraphs 1.a. and 1.b. of this section.
- 3. Driver requirements during ELD data diagnostic events. If an ELD indicates that there is a data inconsistency that generates a data diagnostic event, the driver must immediately contact GTL INTERMODAL and follow the recommendations in resolving the data inconsistency.

DISCIPLINARY REVIEW:

Driver understands that it is first and foremost, a driver's responsibility to both accurately maintain his/her Logs/Record of Duty Status according to applicable law. Under no circumstances is it permissible for a Driver to claim that GTL INTERMODAL forced him/her to violate the applicable Hours of Service, or to complain that he/she didn't know the applicable regulations. If Driver believes GTL INTERMODAL has asked him/her to exceed or otherwise violate applicable Hours of Service rules, Driver must make a written complaint, within 5 days of the driver's understanding such a violation has/may have occurred, to GTL INTERMODAL outlining the issues and requesting assistance in correcting the issue going forward. If Driver needs assistance in learning or complying with the Hours of Service rules, Driver must

HOURS OF SERVICE POLICY AND PROCEDURES

request such assistance before operating a CMV, or as soon as practicable after learning of an issue needing further education or clarification.

A submitted False Log is a federal offense punishable up to and including the imposition of fines and penalties, as well as discipline up to and including termination of employment or cancellation of contract.

GTL INTERMODAL reserves the right to discipline a Driver, including, but not limited to, termination of a Driver's employment or cancelling a Driver's contract based on the circumstances of any observed or reported violations of this Policy or applicable law.

| By my signature below, I certify that I have read the above police or contract driver for GTL INTERMODAL | |
|--|-----------|
| Receipt of GTL INTERMODAL Hours of Service Policy and | |
| Driver Name: | |
| Driver/Associate Signature | Date |
| Received by Signature: | Title |