Department *of* Public Safety
Driver License Division

Commercial Driver Education School / Testing Only School Application

Commercial Driver Training School*☐ Branch Office☐ Testing Only School☐

*Number of Branch Offices: _____ Original☐ Renewal☐

RETURN COMPLETED APPLICATION TO:
Attention: Kamie Bell/Tawney Massey/Erin Hammond
Driver License Division
PO Box 144501
Salt Lake City, UT 84114-4501

Section 1: General

Name of School: _____ Date of Application: _____

Address (Street, City, State, Zip): _____

Phone Number: _____ Type of Business: Sole Prop☐ Partnership☐ Corporation☐ Other☐

Section 2: School Information

List the names, addresses, and telephone numbers of all owners, partners, corporate directors, officers, and managers:

Name	Position or Office	Address	Phone Number

List the name of the operator responsible for this school or branch office.

Name: _____ Address (Street, City, State, Zip): _____

Section 3: Instructor Information

List the names of the instructors responsible for this school or branch office (Testing Only Schools do not need to complete this section):

Name	Address (Street, City, State, Zip)

Section 4: Tester Information

List the names and addresses of all certified testers, full or part-time (Testing Only Schools):

Name	Address (Street, City, State, Zip)

Section 4.5: Secretaries

List the names and addresses of all secretaries using the DEMS system website, full or part-time:

Name	Address (Street, City, State, Zip)

Section 5: Motor Vehicle Fleet

List all vehicles owned or leased by the school – use additional paper if needed:

Year and Make	VIN Number	License Plate Number	Owned	Leased

Vehicle Insurance Company: _____ Policy Number: _____ Phone Number: _____

Section 6: Questions

All questions must be fully answered (if you answered yes to any of the questions, an explanation is provided in the next section):

1. Have any owners, partners, associates, or corporation officers ever operate a commercial driver training school before? If yes, please explain your answer. State days of operation and reason for discontinuance. YES ☐ NO ☐
2. Has the proprietor, partner, or any other officer or stockholder ever been charged with, or convicted of, any crime, including motor vehicle violations? If yes, please explain your answer. YES ☐ NO ☐
3. Has the vehicle registration or driver license of the proprietor, partner, or any other officer or stockholder ever been suspended or revoked? If yes, please explain your answer. YES ☐ NO ☐
4. Is your commercial driver training school or testing-only school located in an area zoned for such operations? If no, please explain your answer. YES ☐ NO ☐
5. Is your equipment, including motor vehicles, owned by your school? If no, please attach a copy of the lease agreement. YES ☐ NO ☐
6. Is your commercial driver training school or testing-only school located within 1,500 feet of a building in which motor vehicle registrations or driver licenses are issued to the public? If yes, please explain your answer. YES ☐ NO ☐
7. Is your commercial driver training school or testing-only school the principal business entity of the address shown above? YES ☐ NO ☐
8. Do all school facilities comply with all state laws and regulations and municipal ordinances and regulations relating to public health and safety for the school and business facilities? If no, please explain your answer. YES ☐ NO ☐
9. Does your commercial driver training school or testing-only school maintain a permanent office facility? YES ☐ NO ☐

Commercial Driver Training Schools Only:

1. Does your commercial driver training school maintain a permanent classroom facility? If no, please explain your answer. YES ☐ NO ☐
2. Indicate the number of square feet in the classroom: _____
3. Do your classrooms have adequate lighting, heating, and ventilation? YES ☐ NO ☐
4. How many feet of floor space does your commercial driver training school contain? _____
5. Does your classroom have a blackboard? YES ☐ NO ☐
6. For how many students do you have seating and desk/writing facilities? _____
7. Does your classroom facility contain charts and diagrams or pictures relating to the operation of motor vehicles and traffic laws? YES ☐ NO ☐
8. Does your classroom facility contain textbooks, reference books, and pamphlets relating to the proper operation of motor vehicles and traffic laws? YES ☐ NO ☐
9. Is your classroom equipped with a moving picture or slide projector with suitable driver training films and/or slides? YES ☐ NO ☐
10. Does your school have an online/homestudy classroom course? YES ☐ NO ☐
11. Has the course curriculum been approved by the state program coordinators? YES ☐ NO ☐
12. Is your classroom equipped with other teaching aids? YES ☐ NO ☐
13. Is your classroom facility in the same building as the office facility? If not, please explain. YES ☐ NO ☐
14. (Renewal applicants only) How many students completed your driver training course last year? _____
15. What is the current fee for your driver training course?_____
16. How many days of the week will the school conduct classroom, behind-the-wheel, or observation training? _____
17. How many classes will be offered per day?_____

Testing-Only Schools:

1. Is your testing-only school located in the same location as a commercial driver training school? YES ☐ NO ☐
2. Does your school contain a secure area for each tester to store testing forms? YES ☐ NO ☐
3. What is the current fee for your testing?_____

EXPLANATIONS: _____

_____

_____

_____

_____

_____

_____

Section 7: Conditions

The undersigned undertakes and agrees to all of the following conditions as a prerequisite to the issuance and the continuing effect of a commercial driver training school license.

A. To ensure that adequate records are kept as prescribed by the rules and regulations of the Department of Public Safety, and to permit the inspection of such records by an authorized department representative during regular office hours.
B. To employ or otherwise make use of instructors who have been properly licensed by the Department of Public Safety.
C. To employ or otherwise make use of an operator who has been properly licensed by the Department of Public Safety.
D. To advise the Department of Public Safety when an instructor or tester is terminated by the school. Please include a brief statement on the reasons for such termination(s).
E. To comply with all of the provisions of Utah Administrative Rule R708-2, R708-37, R708-40, and Utah Code 53-3-501 and 53-3-510 relating to commercial driver training or testing only schools.

F. To advise the Department of Public Safety immediately of any material change in the application or the schedules that are made a part thereof.

I, the undersigned, certify that I have read the laws, rules, and regulations governing commercial driver training schools and testing-only schools and that I agree to abide by all rules, regulations, and laws set forth. I affirm that all statements made by me in this application are true and correct.

Owner Signature: _____ Date: _____

Program Coordinator: _____ Date: _____