

FOLEY LOGISTICS SAFE DRIVING PLAN

Company Name	Foley Logistics Pty Ltd	Office Phone No.	1300 412 720
Office Address	PO Box. 288 Sanctuary Cove, QLD 4212		
ABN	84 678 819 504	Date	16 th of December 2025

Driver Name			
Licence No.		Licence Class	
Expiry Date		Passenger (if any)	

Vehicle Registration		Vehicle Type	
Trailer 1 #		Trailer 2 #	
Trailer 3 #			

Emergency Contact No.	0436 019 958		
Responsible Supervisor	Hayden Foley		

<p>Driver Declaration:</p> <p>I confirm that I:</p> <ul style="list-style-type: none"> • Have read and understand the Foley Logistics Safe Driving Policy • Hold the correct licence and permits • Will comply with Chain of Responsibility requirements • Have been inducted and signed off on Foley Logistics OH&S Policy • Have been inducted and signed off on Foley Logistics Drug & Alcohol Policy • Confirm I am fit to drive today • Confirm I am not under the influence of Drugs or Alcohol • I have completed a prestart check today
Driver Signature:
Print Name:
Date:



DRIVING THE ECONOMY

Forward & Return Travel Plan

Time	From	To	Activity

Trip Completion Date	
Time Completed	