

**Illinois Secretary Of State  
I.R.P. Audit Division  
Room 235 Howlett Building  
Springfield, Illinois 62756  
Phone (217) 782-2391 Fax (217) 782-9566**

**PRE AUDIT QUESTIONNAIRE**

Registrant \_\_\_\_\_ Firm No. \_\_\_\_\_ **Audit Years:** \_\_\_\_\_

**DATE MAILED:**

Please take a few minutes of your time to complete this questionnaire and return it to the above address within 10 business days from receipt. Your response will help the auditor understand your operation and record keeping procedures, and facilitate the audit process. If additional space is needed, please use the reverse side of the form, or attach separate sheets or schedules and identify the question being continued.

**REGISTRANT INFORMATION**

1. Please complete the following information.

Business Address \_\_\_\_\_ City/St. \_\_\_\_\_  
Mailing Address \_\_\_\_\_ City/St. \_\_\_\_\_  
TAN/FEIN/SSN \_\_\_\_\_  
Contact Person \_\_\_\_\_ Fax No. \_\_\_\_\_ Phone No. \_\_\_\_\_  
Title \_\_\_\_\_ Email address \_\_\_\_\_  
  
Agent \_\_\_\_\_ Phone No. \_\_\_\_\_  
Contact Person \_\_\_\_\_ Fax No. \_\_\_\_\_

**OPERATIONS INFORMATION**

2. List all your apportioned and non-apportioned (fully registered or plated) **FLEETS**.

Base <u>Jurisdiction</u>	IRP Acct. No. and <u>Fleet No.</u>	# of Units <u>Power</u>	Apportioned OR <u>Full Registration</u>
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

3. List the locations of your major facilities and terminals (e.g. operating center, dispatch or service centers, garage or maintenance locations). Please denote dispatch points with an asterisk (\*)

Acct./Fleet #    Locations(City and State)

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

4. Describe what each fleet hauls.

Acct./Fleet #    Products

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

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**OPERATIONS INFORMATION(Cont'd)**

5. Do you have owner operators in your fleet?  Yes  No  
 If yes, how many power units belong to owner operators? \_\_\_\_\_
- Do they haul for other companies?  Yes  No  
 Where are they base plated?  IL \_\_\_\_\_.....(list other states)
6. Do you operate any of your power units on trip permits?  Yes  No
7. Do you operate in jurisdiction/s where your fleets are not apportioned?  
 If yes:  Yes  No  
 In what jurisdictions? \_\_\_\_\_  
 Under what authority? \_\_\_\_\_  
 Are copies of trip permits maintained?  Yes  No

**MILEAGE RECORDKEEPING AND REPORTING**

8. Are Individual Vehicle Distance Records (IVDR's) maintained as described in the I.R.P. INSTRUCTION manual?  
 Yes  No If no, skip questions 9 through 15 and attach a narrative description of your mileage accounting system.
9. Who records the miles on the Individual Vehicle Distance Records (IVDRs) ? (I.E. Driver, Dispatcher, Clerk)  
 \_\_\_\_\_
10. Which of the following are recorded on the IVDRs:  
 Registrant's Name  Trip Dates (Beg. & End.)  Routes (Hwy.Nos.) Traveled  
 Power Unit Number  Trip Origin & Destination  Mileage by Jurisdiction  
 Trailer Unit Number  Driver's Name or Signature  Total Trip Miles  
 Fleet Number  Odom./Hub. Readings  Others
11. Are all miles (deadhead,bobtail etc.) recorded on the IVMRs?  Yes  No  
 If no, indcate reason/circumstance for non recorded miles. \_\_\_\_\_
12. Identify how trip mileage is determined on IVDR:  
 PC Miler/Pro Miles  Odometer/Hubometer Readings \*+  
 State Maps  Household Goods Mileage Guide  
 Predetermined Mile Chart  Other  
 \*+=how are miles recorded if odom/hub is inoperable?
13. Are the IVDRs reviewed for accuracy and completeness by a person other than the one who prepares them?  Yes  No  
 If yes, please state the reviewer's name and title: \_\_\_\_\_
14. Which of the following source documents do you maintain to support the IVMR?  
 Trip Reports  Drivers Daily Logs  Freight Bills/Manifests  
 Receiving Contracts  Drivers Pay Records  Other (please explain):
15. Are the IVDRs batched/filed by equipment number and in date order?  Yes  No  
 If no, please explain how they are batched:  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

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**MILEAGE SUMMARIES AND RECAPS**

16. Are monthly summaries prepared from the IVDRs?  Yes  No  
If no, please explain how monthly miles are compiled:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

17. Do the monthly summaries show mileage by each vehicle and jurisdiction for each fleet?  Yes  No  
**If no, please explain how monthly mileage totals are compiled:**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

18. Are yearly recaps prepared from:  Monthly Summaries  
 Quarterly Summaries  
 Other (explain)

\_\_\_\_\_  
\_\_\_\_\_

19. Do the yearly recaps show annual mileage generated by unit in each jurisdiction by fleet?  Yes  No  
If no, please explain:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

20. Do the yearly recaps cover the mileage reporting period from July 1 through June 30 of the preceding year?  Yes  No  
If no, please identify the period covered:

21. Please identify:

- A.) Address where records are retained \_\_\_\_\_
- B.) Person responsible for record retention \_\_\_\_\_
- C.) Person's tenure at that position \_\_\_\_\_

COMMENTS:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Name (Print) \_\_\_\_\_ Title : \_\_\_\_\_

Signature \_\_\_\_\_ Date : \_\_\_\_\_

We appreciate you taking time to complete this questionnaire. If you have any questions, please contact Cheryll Atkinson, at the State of Illinois offices noted on the first page of this questionnaire.

Should you require an electronic version of this form (M S EXCEL 5.0) please contact as noted above, OR send e-mail request to "catkinson@ilsos.net".