

# Trucking Service Evaluation Scorecard

## General Information

Company Name

Date

Evaluator Name

Truck Number/ID

## Evaluation Criteria

Criteria	Description	Score (1-5)	Comments
Timeliness		<input type="text"/>	<input type="text"/>
Communication		<input type="text"/>	<input type="text"/>
Vehicle Condition		<input type="text"/>	<input type="text"/>
Driver Professionalism		<input type="text"/>	<input type="text"/>
Compliance & Safety		<input type="text"/>	<input type="text"/>

## Overall Comments

Evaluator Signature

