

## VEHICLE INSPECTION RECORD [PRE- MID- POST- and WEEKLY]

Please fill out this daily record completely, using a new sheet for each day/vehicle in service. When completing, DO NOT use a dash or check mark in the boxes – use your initials. Inspection record will be invalid if you don't use your initials. If you are the Mid-Shift Driver, please initial all items in the Pre-Trip columns under the Pre-Trip driver's initials. **Report any defects to your vehicle immediately to your supervisor or manager before taking it on the road.** If you have questions, consult with your supervisor or manager. Keep on file for 90 days, unless the vehicle is involved an incident or accident – keep those permanently on file by attaching them to the copy of the incident or police report.

Vehicle #: \_\_\_\_\_ Tablet #: \_\_\_\_\_

Vehicle Location: \_\_\_\_\_

Day of the week: Su M T W Th F Sa

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

Pre-Trip Odometer: \_\_\_\_\_

Post-Trip Odometer: \_\_\_\_\_

### PRE-TRIP (and SHIFT CHANGE) ITEMS

INITIALS	PRE-TRIP: EXTERIOR	COMMENT
	<b>Exterior Body</b> - Check for damage; clear any debris. Make sure all doors open and close properly, and are unlocked and accessible.	
	<b>Windows &amp; Mirrors</b> – Verify windows and mirrors are not cracked or broken.	
	<b>Wipers/Blades</b> – ensure blades are not cracked or torn, and in good working order.	
	<b>Lights &amp; Reflectors</b> – Turn on headlights and four-way flashers, make sure all lamps illuminate. Check high and low beams on the headlights. Check to see reflectors are in good condition. Brake lights checked by 2nd person.	
	<b>Tires</b> – check the tread depth, pressure, and overall condition. No punctures, cracks, tread separations; adequate tread depth prescribed by manufacturer. Check rims for missing lug nuts, broken stubs.	
	<b>Undercarriage</b> – Look for water, oil, gas, transmission, or other fluid leaks under the vehicle. If leak is detected, report it immediately.	

INITIALS	PRE-TRIP: INTERIOR	COMMENT
	<b>Seat Belts &amp; Safety Restraints</b> – Check for damage, and that all belts and restraints are available, functional, and in good condition. Check restraints and passenger belts for any fraying or wear to belts.	
	<b>Cleanliness/Items Secured</b> – Check for cleanliness and that all items are secured (e.g. assistive devices, scrapers, spray cleaners, etc.) Ensure the driver's area is clean and all items are secured.	
	<b>Emergency Equipment</b> – Check fire extinguisher (fully charged, on board, and secure), web cutter, first aid/bloodborne pathogen kit(s), triangle warning kit, cameras and drag blanket (if applicable).	
	<b>Emergency Door, Roof Hatch, Windows, Horn</b> – Check that all are accessible and in working order. Make sure the rear door buzzer works properly (if applicable) – the buzzer must work when the key is engaged and the back door is open.	
	<b>Technology</b> – ensure devices are in good working order.	
	<b>Climate Control</b> – check functionality of heating and air conditioning units.	
	<b>Warning Lights/Gauge Levels</b> - Visually check all gauges and report any warning lights.	
	<b>Accident Response Kit</b> – calling tree and forms for reporting accidents are in place (if applicable).	
	<b>Wheelchair Securement</b> – Mechanisms are in place and functioning, tracks are clear of debris, and adequate number of devices/seatbelts are present.	
	<b>Wheelchair Lift/Ramp</b> – Cycle lift, paying attention to the wheelchair securement system. Double check safety barriers.	

## POST-TRIP ITEMS

INITIALS	POST-TRIP	COMMENT
	Properly set brake and vehicle securement.	
	All windows/hatches are secured.	
	No passengers or personal property remains in the vehicle.	
	No signs of damage to the interior or exterior of the vehicle.	
	<b>Emergency Equipment</b>	
	<b>Brakes</b>	
	<b>Steering</b>	
	<b>Lighting Devices/Reflectors</b>	
	<b>Tires</b>	
	<b>Horn</b>	
	<b>Wipers</b>	
	<b>Mirrors</b>	
	<b>Wheels &amp; Rims</b>	

## WEEKLY ITEMS

Day of the week: Su M T W Th F Sa

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

INITIALS	POST-TRIP	COMMENT
	<b>Fluids – check/fill each:</b>	
	<b>Oil</b>	
	<b>Radiator Level</b>	
	<b>Windshield Washer Fluid</b>	
	<b>Power Steering Fluid</b>	
	<b>Brake Fluid</b>	
	<b>Transmission Fluid</b>	
	<b>Battery</b> (if not maint-free)	
	<b>Battery</b> – check cable connections are tight and clear of corrosion.	
	<b>Belts</b> – check that they are not cracked/worn.	
	<b>Hoses</b> – Check for leaks; if found, report immediately. Make sure hoses are not spongy/cracked.	
	<b>Exhaust</b> - Check muffler for looseness.	

**Explanation of any items listed above:**

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

## SIGNATURES

I have personally conducted the pre-trip inspection for this vehicle and have found it to be in the condition stated above.

\_\_\_\_\_  
**Pre-Trip Driver's Signature**

I have personally conducted the mid-shift inspection for this vehicle and have found it to be in the condition stated above.

\_\_\_\_\_  
**Mid-Shift Driver's Signature** (if vehicle changed driver mid-day)

Reason for change in drivers:
<input type="radio"/> Shift change <input type="radio"/> Accident/Incident <input type="radio"/> Other: _____

I have personally conducted the post-trip inspection for this vehicle and have found it to be in the condition stated above.

\_\_\_\_\_  
**Post-Trip Driver's Signature**

\_\_\_\_\_  
**Supervisor's or Manager's Signature**

\_\_\_\_\_  
**Date**

<b>Maintenance assessment:</b> <input type="radio"/> Condition of the above vehicle is satisfactory. <input type="radio"/> Above defects have been corrected. Date of repair: _____ <input type="radio"/> Vehicle removed from service for necessary repair(s). Date removed: _____	
_____ <b>Maintenance Supervisor Signature</b>	_____ <b>Date</b>