

DRIVER'S VEHICLE INSPECTION REPORT

Rev. 03.18.2010

Check any defective item and give details under "Remarks."

Date _____ Truck/Tractor No. _____

- | | | | |
|--|--------------------------------------|--|--|
| <input type="checkbox"/> Air Compressor | <input type="checkbox"/> Fifth Wheel | <input type="checkbox"/> Oil Pressure | <input type="checkbox"/> Starter |
| <input type="checkbox"/> Air Lines | <input type="checkbox"/> Front Axle | <input type="checkbox"/> On-Board Recorder | <input type="checkbox"/> Steering |
| <input type="checkbox"/> Battery | <input type="checkbox"/> Fuel Tanks | <input type="checkbox"/> Radiator | <input type="checkbox"/> Tachograph |
| <input type="checkbox"/> Brake Accessories | <input type="checkbox"/> Heater | <input type="checkbox"/> Rear End | <input type="checkbox"/> Tires |
| <input type="checkbox"/> Brakes | <input type="checkbox"/> Horn | <input type="checkbox"/> Reflectors | <input type="checkbox"/> Transmission |
| <input type="checkbox"/> Carburetor | <input type="checkbox"/> Lights | <input type="checkbox"/> Safety Equipment | <input type="checkbox"/> Wheels |
| <input type="checkbox"/> Clutch | • Head – Stop | • Fire Extinguisher | <input type="checkbox"/> Windows |
| <input type="checkbox"/> Defroster | • Tail – Dash | • Flags-Flares-Fuses | <input type="checkbox"/> Windshield Wipers |
| <input type="checkbox"/> Drive Line | • Turn Indicators | • Spare Bulbs & Fuses | <input type="checkbox"/> Other |
| <input type="checkbox"/> Engine | <input type="checkbox"/> Mirrors | • Spare Seal Beam | |
| | <input type="checkbox"/> Muffler | <input type="checkbox"/> Springs | |

Trailer(S) No.(S) _____

- | | | | |
|--|---------------------------------------|------------------------------------|---------------------------------|
| <input type="checkbox"/> Brake Connections | <input type="checkbox"/> Doors | <input type="checkbox"/> Roof | <input type="checkbox"/> Wheels |
| <input type="checkbox"/> Brakes | <input type="checkbox"/> Hitch | <input type="checkbox"/> Springs | <input type="checkbox"/> Other |
| <input type="checkbox"/> Coupling Chains | <input type="checkbox"/> Landing Gear | <input type="checkbox"/> Tarpaulin | |
| <input type="checkbox"/> Coupling (King) Pin | <input type="checkbox"/> Lights-All | <input type="checkbox"/> Tires | |

Remarks _____

CONDITION OF THE ABOVE VEHICLE IS SATISFACTORY

Driver's Signature _____

- Above Defects Corrected
- Above Defects Need Not Be Corrected For Safe Operaton of Vehicle

Mechanic's Signature _____ Date _____

Driver's Signature _____ Date _____