## BOUND EDGE

## **DRIVER'S VEHICLE INSPECTION REPORT**

AS REQUIRED BY THE D.O.T. FEDERAL MOTOR CARRIER SAFETY REGULATIONS, I SUBMIT THE FOLLOWING:

DATE:	TRACTOR/	RUCK NO.:	TRAILER(S) NO.(S):	
	HOB EPO CRX KA A I detect the result in its i	oreakdown. following defects or deficience	motor vehicle as would be likely to affect the safety of its operation or result in its encies in this motor vehicle as would be likely to affect the safety of its operation or	
	indicate whether det	ects are on IRACIOR/IR	UCK or TRAILER - Use sufficient detail to locate for mechanic.	
	DRIVER'S SIGN		TURE:	
	☐ Above defects correcte	d [	☐ Above defects need not be corrected for safe operation of vehicle	
	MECHANIC'S SIGNATURE:			
DRIVER'S SIGNATURE:  © Copyright 2002 & Published by J. J. KELLER & ASSOCIATES, INC.				