

DRIVER'S VEHICLE INSPECTION REPORT

TRACTOR/TRUCK NO.: _____

TRAILER(S) NO.(S): _____

TRACTOR/TRUCK	DRIVER'S REPORT	MECHANIC'S REPORT	TRACTOR/TRUCK	DRIVER'S REPORT	MECHANIC'S REPORT	TRACTOR/TRUCK	DRIVER'S REPORT	MECHANIC'S REPORT	TRAILER(S)	DRIVER'S REPORT	MECHANIC'S REPORT
Brake Lines to Trailer			Frame & Assembly			Transmission			Brakes		
Electric Lines to Trailer			Head Lights			Rear Vision Mirror			Brake Connections		
Drive Line			Tail Lights			Steering			Coupling Devices		
Coupling Devices			Stop & Turn Lights			Service Brakes			Coupling (King) Pin		
Tires, Wheels, Rims			Clearance & Marker Lights ..			Speedometer			Doors		
Suspension System			Reflectors			Other Items			Hitch		
Body			Air Pressure Warning Device			EMERGENCY EQUIPMENT			Landing Gear		
Glass			Oil Pressure						Lights – All		
Fuel System			Ammeter						Roof		
Cooling System			Horn						Suspension System		
Engine			Windshield Wipers						Tarpaulin		
Leaks			Parking Brakes						Tires		
Exhaust			Clutch			Spare Bulbs, Fuses			Wheels – Rims		
						Tire Chains			Other Items		

I MADE INSPECTION AS REQUIRED ON LISTED ITEMS
 DRIVER _____ DATE _____

DRIVER USE ✓ IF SATISFACTORY
 USE X IF NOT SATISFACTORY
MECHANIC USE ✓ WHEN CORRECTED AND
 YOUR INITIALS

ODOMETER END OF DAY _____ ODOMETER START OF DAY _____ TOTAL MILES DRIVEN TODAY _____ NEXT LUBRICATION DUE AT _____ <div style="text-align: right; margin-right: 50px;">MILEAGE</div>	<input type="checkbox"/> ABOVE DEFECTS CORRECTED <input type="checkbox"/> ABOVE DEFECTS NEED NOT BE CORRECTED FOR SAFE OPERATION OF VEHICLE <div style="text-align: center;">MECHANIC'S SIGNATURE</div>	DRIVER'S SIGNATURE _____ DATE _____
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BOUND EDGE