

# DRIVER'S VEHICLE INSPECTION REPORT – TANKER

AS REQUIRED BY THE D.O.T. FEDERAL MOTOR CARRIER SAFETY REGULATIONS

Ply 1 - Original  
Ply 2 - Copy

CARRIER: \_\_\_\_\_ LOCATION: \_\_\_\_\_

DRIVER: \_\_\_\_\_ DATE OF POST-TRIP: \_\_\_\_\_ ODOMETER READING: \_\_\_\_\_

TRUCK/TRACTOR NO.: \_\_\_\_\_ TRAILER(S) NO.(S): \_\_\_\_\_

CHECK ANY DEFECTIVE ITEM AND GIVE DETAILS UNDER "REMARKS"

**Prt = Pre-Trip, Pot = Post-Trip, RR = Requires Repair**

TRUCK/TRACTOR				TRAILER			
Prt	Pot	RR	Item	Prt	Pot	RR	Item
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Air Compressor	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Brake Connections
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Air Lines	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Brakes
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Battery	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Coupling Devices
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Belts and Hoses	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Coupling (King) Pin
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Body	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Doors
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Brake Accessories	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Hitch
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Brakes, Parking	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Landing Gear
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Brakes, Service	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Lights - All
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Clutch	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Reflectors/Reflective Tape
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Coupling Devices	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Roof
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Defroster/Heater	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Straps
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Drive Line	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Suspension System
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Engine	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Tarpaulin
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Exhaust	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Tires
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Fifth Wheel	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Wheels and Rims
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Fluid Levels	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Other
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Frame and Assembly				
			Front Axle	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Safety Equipment
			Fuel Tanks	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Fire Extinguisher
			Generator	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Flags - Flares - Fusees
			Horn	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Reflective Triangles
			Lights	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Spare Bulbs and Fuses
			Head - Stop	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Spare Seal Beam
			Tail - Dash	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Starter
			Turn Indicators	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Steering
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Mirrors	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Suspension System
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Muffler	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Tire Chains
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Oil Level	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Tires
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Radiator Level	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Transmission
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Rear End	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Trip Recorder
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Reflectors/Reflective Tape	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Wheels and Rims
				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Windows
				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Windshield Wipers
				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Other

REMARKS: \_\_\_\_\_

CONDITION OF THE ABOVE VEHICLE IS SATISFACTORY  ABOVE DEFECTS CORRECTED  ABOVE DEFECTS NEED NOT BE CORRECTED FOR SAFE OPERATION OF VEHICLE

MECHANIC'S SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_

DRIVER'S SIGNATURE UPON COMPLETION OF POST-TRIP \_\_\_\_\_

DRIVER'S SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_

MARK CLEARLY ALL DAMAGE OR DEFICIENCIES FOUND BY USING THE FOLLOWING SYMBOL(S):

C = CUT H = HOLE D = DENT BR = BROKEN M = MISSING S = SCRATCH P = PATCHED

