DRIVER’S VEHICLE INSPECTION REPORT – MOTOR COACH
AS REQUIRED BY THE D.O.T. FEDERAL MOTOR CARRIER SAFETY REGULATIONS

Company: ____________________________  Vehicle No.: ____________________________
Location: ____________________________  Date of Post-Trip: ____________________________
Driver: ____________________________  Ending Mileage: ____________________________

Starting Mileage: ____________________________  Total Mileage: ____________________________

CHECK ANY DEFECTIVE ITEM AND GIVE DETAILS UNDER “REMARKS”

[Table of defects and symbols for marking damage or deficiencies]

Remarks: ________________________________________________________________

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

☐ 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: ____________________________  DATE: ____________________________

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