**Vehicle Inspection Checklist – Light/Medium Vehicles**

|  |  |
| --- | --- |
| Assigned Driver: | Department: |
| Vehicle Year/Make/Model: | Vehicle Number: |
| License/Tag Number: | Mileage: |
| **Fluid Levels** |  **Status** | **Comments** |
|  | **OK** | **Low** | **Filled** |  |
| Brake fluid level |  |  |  |
| Engine oil level |  |  |  |
| Engine coolant level |  |  |  |
| Power steering fluid level |  |  |  |
| Transmission Fluid Level |  |  |  |
| Washer fluid level |  |  |  |
| **Vehicle Components** |  **Status** | **Comments** |
|  | **OK** | **Issue** | **Repaired** |  |
| Auto body condition |  |  |  |
| Windshield condition |  |  |  |
| Wipers |  |  |  |
| Rear view, side view mirrors |  |  |  |
| Headlights and high beams |  |  |  |
| Fog lights |  |  |  |
| Taillights and brake lights |  |  |  |
| Turn signals |  |  |  |
| Emergency flashers |  |  |  |
| Brakes |  |  |  |
| Tires and tread depth |  |  |  |
| Engine |  |  |  |
| Battery |  |  |  |
| Cooling system |  |  |  |
| Steering  |  |  |  |
| Transmission |  |  |  |
| Seat belts |  |  |  |
| Interior condition |  |  |  |
| Interior lights & horn |  |  |  |
| First aid kit/triangles |  |  |  |
| Accident report & ins. card |  |  |  |
| **Driver Signature:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **Date:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| **( ) Repairs made and vehicle is safe to operate** **( ) Repairs needed, but vehicle is safe to operate** **( ) Repairs needed, vehicle is not safe to operate**   | **Mechanic: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_****Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** |
| **Mechanic Comments:** |  |

**7-Day Vehicle Inspection Checklist – Light/Medium Vehicles**

|  |  |
| --- | --- |
| Assigned Driver: | Department: |
| Vehicle Year/Make/Model: | Vehicle Number: |
| License/Tag Number: | Mileage End of Week: |
| ***Instructions:*** *Place a* ***√ if OK*** *or an* ***X if a defect*** *is identified and provide comments as to specific issue.* ***Submit immediately to management/maintenance if defect identified.*** |
| **Fluid Levels** | **M** | **T** | **W** | **R** | **F** | **S** | **S** | **Comments** |
| Brake fluid level |  |  |  |  |  |  |  |  |
| Engine oil level |  |  |  |  |  |  |  |
| Engine coolant level |  |  |  |  |  |  |  |
| Power steering fluid level |  |  |  |  |  |  |  |
| Transmission Fluid Level |  |  |  |  |  |  |  |
| Washer fluid level |  |  |  |  |  |  |  |
| **Vehicle Components** |  |  |  |  |  |  |  |  |
| Auto body condition |  |  |  |  |  |  |  |  |
| Windshield condition |  |  |  |  |  |  |  |
| Wipers |  |  |  |  |  |  |  |
| Rear view, side view mirrors |  |  |  |  |  |  |  |
| Headlights and high beams |  |  |  |  |  |  |  |
| Fog lights |  |  |  |  |  |  |  |
| Taillights and brake lights |  |  |  |  |  |  |  |
| Turn signals |  |  |  |  |  |  |  |
| Emergency flashers |  |  |  |  |  |  |  |
| Brakes |  |  |  |  |  |  |  |
| Tires and tread depth |  |  |  |  |  |  |  |
| Engine |  |  |  |  |  |  |  |
| Battery |  |  |  |  |  |  |  |
| Cooling system |  |  |  |  |  |  |  |
| Steering  |  |  |  |  |  |  |  |
| Transmission |  |  |  |  |  |  |  |
| Seat belts |  |  |  |  |  |  |  |
| Interior condition |  |  |  |  |  |  |  |
| Interior lights & horn |  |  |  |  |  |  |  |
| First aid kit/triangles |  |  |  |  |  |  |  |
| Accident report & ins. card |  |  |  |  |  |  |  |
| Driver Initials |  |  |  |  |  |  |  |
| **( ) Repairs made and vehicle is safe to operate** **( ) Repairs needed, but vehicle is safe to operate** **( ) Repairs needed, vehicle is not safe to operate**   | **Mechanic: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_****Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**  |

**Mechanic Comments:**