

# Vehicle Inspection

TO BE COMPLETED BY VEHICLE OPERATOR ↓

FULL NAME

PHONE NUMBER

## INSPECTION POINTS

- |                                           |                                                             |                                           |                                                             |
|-------------------------------------------|-------------------------------------------------------------|-------------------------------------------|-------------------------------------------------------------|
| HEADLIGHTS.....                           | <input type="checkbox"/> PASS <input type="checkbox"/> FAIL | REAR WINDOW & OTHER GLASS.....            | <input type="checkbox"/> PASS <input type="checkbox"/> FAIL |
| TAIL LIGHTS.....                          | <input type="checkbox"/> PASS <input type="checkbox"/> FAIL | WINDSHIELD WIPERS.....                    | <input type="checkbox"/> PASS <input type="checkbox"/> FAIL |
| TURN INDICATOR LIGHTS.....                | <input type="checkbox"/> PASS <input type="checkbox"/> FAIL | FRONT SEAT ADJUSTMENT.....                | <input type="checkbox"/> PASS <input type="checkbox"/> FAIL |
| STOP LIGHTS.....                          | <input type="checkbox"/> PASS <input type="checkbox"/> FAIL | DOORS (Open/Close/Lock).....              | <input type="checkbox"/> PASS <input type="checkbox"/> FAIL |
| FOOT BRAKES (Pads/Shoes thickness).....   | <input type="checkbox"/> PASS <input type="checkbox"/> FAIL | HORN.....                                 | <input type="checkbox"/> PASS <input type="checkbox"/> FAIL |
| EMERGENCY/PARKING BRAKE.....              | <input type="checkbox"/> PASS <input type="checkbox"/> FAIL | SPEEDOMETER.....                          | <input type="checkbox"/> PASS <input type="checkbox"/> FAIL |
| STEERING MECHANISM.....                   | <input type="checkbox"/> PASS <input type="checkbox"/> FAIL | BUMPERS.....                              | <input type="checkbox"/> PASS <input type="checkbox"/> FAIL |
| WINDSHIELD.....                           | <input type="checkbox"/> PASS <input type="checkbox"/> FAIL | MUFFLER AND EXHAUST SYSTEM.....           | <input type="checkbox"/> PASS <input type="checkbox"/> FAIL |
| SAFETY BELTS FOR DRIVERS & PASSENGERS.... | <input type="checkbox"/> PASS <input type="checkbox"/> FAIL | TIRES, INCL TREAD DEPTH.....              | <input type="checkbox"/> PASS <input type="checkbox"/> FAIL |
|                                           |                                                             | INTERIOR & EXTERIOR REAR VIEW MIRRORS.... | <input type="checkbox"/> PASS <input type="checkbox"/> FAIL |

## VEHICLE INSPECTION RESULTS (Inspector to circle)

Any markings on the 'FAIL' side will automatically fail inspection

PASS

FAIL

-----  
Inspection Date

TO BE COMPLETED BY INSPECTOR ↓

VEHICLE MILEAGE

LICENSE PLATE STATE

LICENSE PLATE NUMBER

VIN

VEHICLE MAKE

VEHICLE MODEL

VEHICLE YEAR

NUMBER OF DOORS

HAS REGISTRATION STICKER? (YES/NO)

REGISTRATION STICKER MONTH/YEAR (MM/YY)

INSPECTOR COMPANY

INSPECTOR ADDRESS

INSPECTOR NAME

INSPECTOR SIGNATURE

STATE CERTIFICATION NUMBER