Vehicle Pre-use Inspection Form

**Department: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

|  |  |
| --- | --- |
| **Check before starting engine** | **Check after starting engine** |
| Check for fluid leaks - oil, gas, brake, washer  Tires - pressure, tread depth or damage  Wheels - defects in rim, loose or missing fasteners  Load - secure and compliant with regulations  Emergency equipment - installed and inspected as required  Damage? | Seatbelts - in good condition  Parking brake - holds against slight acceleration  Foot brake - holds, stops vehicle smoothly  Steering – moves smoothly, no “play”  Lights - headlights, warning lights, and turn signals operational  Dash control panel - all lights and gauges operational  All moving parts - no strange noises  Horn - operational  Visibility - mirrors properly adjusted; windows clean & intact  Wipers/washer - functioning and intact |

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **Date** | **Odometer reading** | **Operator’s initials** | **OK?** | **Not OK - hazard identified** | **Corrective action taken before use** | **By whom?** |
|  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |

**\*Do not use if any of the above do not meet minimum standard. Record and report any defect to your supervisor immediately.**

**Retention**: Current and previous month