

Fleet Vehicle Inspection Checklist

Driver:							Today's Date:				
Vehicle ID No:				License Plate No:							
Expiration Date:				Odometer Reading:							
<i>X – Satisfactory</i>				<i>O – Requires Attention</i>							
DATES											
VEHICLE INSPECTION:											
PRE-START UP	am	pm	am	pm	am	pm	am	pm	am	pm	Comments
Check Oil											
Radiator, Washer Fluid											
Battery Fluids, Connections											
INTERIOR (Start Engine)	X	X	X	X	X	X	X	X	X	X	
Fuel Level											
Alternator Function											
Heat/ Defrost/ AC											
Interior Lights											
Upholstery, Loose Object											
Child Car Seats/Booster											
Seatbelts/ Straps/ Cutter											
First Aid Kit/Body Fluids Kit											
Fire Extinguisher											
Registration/ Insurance											
Radio/Cell Phone											
Horn											
Brakes (Travel, Feel)											
Steering Wheel (Play)											
WINDOWS/MIRRORS	X	X	X	X	X	X	X	X	X	X	
Cleared of Ice/Snow											
Foot Brake/ Parking Brake											
Wipers/Washers											
Mirrors/ Glass/Scraper											
EXTERIOR	X	X	X	X	X	X	X	X	X	X	
Head Lights (High/Low)											
Turn Signals (Front/Rear)											
Emergency Flashers											
Tires (Wear, PSI w/gauge)											
Tail Lights/Back-Up Lights											
Exhaust (Sound, Emissions)											
TRUNK/STORAGE AREA	X	X	X	X	X	X	X	X	X	X	
Spare Tire (Pressure)											
Emergency (Chains, Flares, Flashlight, Blankets)											
UNDER VEHICLE	X	X	X	X	X	X	X	X	X	X	
Obvious Leaks											
Loose/Hanging Objects											
OPERATION	X	X	X	X	X	X	X	X	X	X	
Lift											
Transmission											
Engine/Idle Speed											
DRIVER'S INITIALS											