



Daily / Weekly Vehicle Inspection Checklist



Week Of :	Vehicle ID:				Inspected By:				Vehicle Registration Current:					
Mileage	Start	Finish	Start	Finish	Start	Finish	Start	Finish	Start	Finish	Start	Finish	Start	Finish
Day Of The Week	Monday		Tuesday		Wednesday		Thursday		Friday		Saturday		Sunday	
Items Of Inspection	Ok	Not Ok	Ok	Not Ok	Ok	Not Ok	Ok	Not Ok	Ok	Not Ok	Ok	Not Ok	Ok	Not Ok
Safety Belts Condition														
Brakes / Steering / Operating Cond														
Engine Operating Condition														
Transmission Operating Condition														
Heater Air Conditioning														
Wipers														
Headlights: High beam /Low Beams														
Turn signals														
Brake Lights, Tail Lights, Flashers														
Windows / Windshield														
Insurance Information														
Horn														
Tires – Tread/Condition														
Proper Inflation														
Frame / Body / Damages														
Fire Extinguisher														
First Aid Kit														
Door Mirrors / Rear View Mirror														
Fluids/ Liquids Level Check Below														
Radiator														
Oil														
Transmission														
Power Steering														
Brakes														
Window Washer														
Inspected By														

Note: Comments / Remarks on Back Side of Form

