

Your Company Name 123 Company Lane - New York, NY 12345 Tel. (123) 456-7890 - Fax. (123) 456-7890

## **DRIVER'S VEHICLE INSPECTION REPORT**

CARRIER:		LOCATION:	
DRIVER:	2110	DATE OF POST-TRIP:	ODOMETER READING:
TRUCK/TRACTOR NO.:		TRAILER(S) NO.(S):	
CHECK ANY DEFECTIVE ITEM AND GIVE DETAILS UNDER "REMARKS"  Prt = Pre-Trip, Pot = Post-Trip, RR = Requires Repair			
TRUCK/TRACTOR			TRAILER
□         □         Air Lines         □         □         □         Battery         □	RR  Front Axle  Fuel Tanks  Generator  Horn  Lights  Head - Stop  Tail - Dash  Turn Indicators  Mirrors  Muffler  Oil Level  Radiator Level  Rear End  Reflectors	Prt Pot RR  Safety Equipment Fire Extinguisher Flags - Flares - Fusees Reflective Triangles Spare Bulbs and Fuses Spare Seal Beam Starter Steering Suspension System Tire Chains Tires Transmission Trip Recorder Mheels and Rims Mindows Mindshield Wipers Other	Prt Pot RR
MARK CLEARLY ALL DAMAGE OR DEFICIENCIES FOUND BY USING THE FOLLOWING SYMBOL(S):  C = CUT H = HOLE D = DENT BR = BROKEN M = MISSING S = SCRATCH P = PATCHED  RIGHT  RIGHT SIDE  RIGHT SIDE			
REMARKS:			
		ABOVE DEFECTS CORRECTED  ABOVE DEFECTS NEED NOT BE CORRECTE  ECHANIC'S SIGNATURE:	ED FOR SAFE OPERATION OF VEHICLE
		RIVER'S SIGNATURE:	DATE: