

UWG – MONTHLY VEHICLE INSPECTION REPORT

VEHICLE # _____ ODOMETER READING: _____ DATE: _____

ITEM	OK	ISSUE	COMMENTS
GENERAL:			
CHECK GROUND FOR FLUID LEAKS			
UNUSUAL NOISIES OR VIBRATIONS			
DAMAGE TO INTERIOR / EXTERIOR			
INTERIOR / EXTERIOR CLEAN			
SEAT BELTS WORKING			
BRAKE SYSTEM:			
ADEQUATE BREAKING POWER			
EMERGENCY BRAKE			
LIGHTING DEVICES:			
HEAD/TAIL/BRAKE LIGHTS			
TURN SIGNALS			
LICENSE PLATE LIGHT			
DASHBOARD INDICATOR LIGHTS			WHICH:
TIRES:			
TIRE PRESSURE – LOW OR FLAT			
TIRE TREAD			
WINDSHIELD:			
WINDSHIELD CRACKS			
WIPER BLADES			
A/C OR HEAT CONTROLS:			
A/C WORKING			
HEAT WORKING			
ACCESSORIES: (IF APPLICABLE):			
REAR VIEW CAMERA			
ADDITIONAL COMMENTS:			

EMPLOYEE NAME: _____ SUPERVISOR INTIAL: _____

EMPLOYEE SIGNATURE: _____ DATE: _____

.....
FLEET SERVICES COORDINATOR:

INITIAL: _____ DATE: _____ ARI CONFIRMATION #: _____