

Form Number LLCF-077	Issue Date 03/17/16	Revision Date 06/15/21	Form Number LLCF-077
Company Vehicle Inspection			

Employee Name: _____ Vehicle #: _____

Vehicle Mileage: _____ Date: _____ Department: _____

Item	OK	Needs Repair	N/A	Comments
Outer Vehicle				
Tires (<i>Inflation, tread depth</i>)				
Windshield (<i>clean & free of cracks</i>)				
Outer mirrors (<i>clean & free of cracks</i>)				
New Damage (<i>not reported yet</i>)				
Leaks under vehicle				
License Plate Sticker (<i>up to date</i>)				
Inspection Sticker (<i>up to date</i>)				
Fluid Levels				
Engine Oil				
Coolant Level				
Brake Fluid				
Washer Fluid				
Inside Vehicle				
Vehicle Registration (<i>in vehicle</i>)				
Correct Insurance Card (<i>in vehicle</i>)				
Vehicle Incident Report (<i>in vehicle</i>)				
Seat Belts (<i>driver & passenger</i>)				
Brakes working				
Parking Brake				
Horn				
Mirrors				
Windshield Wipers				
Headlights: Hi/Lo				
Instrument Lights				
Turn Signals				
Reverse Lights				
Tail Lights				
Brake Lights				
First Aid Kit				
Fire Extinguishers (<i>if applicable</i>)				
Backup Alarm (<i>if applicable</i>)				

Signature: _____