

VEHICLE INSPECTION REPORT
INSPECT AND EXPLAIN BRIEFLY ALL DISCREPANCIES

VEHICLE NO.		TYPE			VEHICLE RECEIVED FROM			TIME			DATE		SHIFT		
MECHANICAL	1st	2nd	3rd	BODY	1st	2nd	3rd	GLASS	1st	2nd	3rd	ACCESSORIES	1st	2nd	3rd
OIL				TIRES				WINDSHIELD				RADIO			
WATER				SPARE				VENTS				FIRE EXTINGUISHER			
BATTERY				JACK				DOORS				(CHECK RECHARGE DATE)			
GASOLINE				PAINT				MISC. GLASS				FIRST AID BOX			
BRAKES				HUBCAPS								(CHECK CONTENTS AND REPORT SHORTAGE)			
LIGHTS	HIGH			DENTS OR SCRATCHES											
	LOW							REMARKS:				REMARKS:			
	SIGNAL			REMARKS:											
WIPERS															
GASOLINE ADDED	GAL.														
OIL ADDED	QT.														
REMARKS:															
SUPERVISOR								INSPECTED BY:							
								FIRST				TIME			
								SECOND				TIME			
								THIRD				TIME			