

WEEKLY VEHICLE INSPECTION REPORT



WILLIAM & MARY

CHARTERED 1693

FACILITIES OPERATIONS

Date: Driver Name: Unit Number:

Current Mileage: Location: License Plate Number:

Place a check mark in the box next to each item on the inspection if it is working properly (OK) or an X in the box next to each item that requires repair or replacement (NR) or is not applicable (N/A). Items that have an asterisk and need repair indicate the vehicle is not roadworthy.

Exterior

OK	NR	N/A	DESCRIPTION
			Head Lights (High, Low & Dash Indicator)*
			Brake/Tail Lights*
			Turn Signals & Emergency Flashers*
			License Plate & Light*
			Tires (check pressure & tread wear)*
			Windshield & Windshield Wipers*
			Doors (open, close, lock, unlock)
			Side Mirrors Intact*

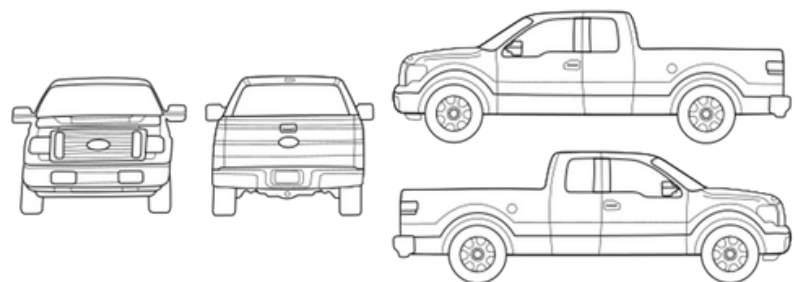
Fluids & More

OK	NR	N/A	DESCRIPTION
			Fluid Leaks Underneath Vehicle
			Fuel Cap Present & Secured
			Oil Check
			Wiper Fluid Check
			Coolant/Antifreeze Check
			Brake Fluid Check
			Fire Extinguisher (present in trade shop vehicles, box trucks & within annual inspection)
			First Aid Kit (if available and within expiration dates)

Interior

OK	NR	N/A	DESCRIPTION
			Windows (roll up & down)
			Heater/Defroster/Air Conditioner (operational)
			Seat Belts*
			Interior & Exterior Vehicle Cleanliness
			Mirrors Properly Adjusted (rear & side views)*
			Brakes* (no noise & operational)
			Horn*
			Steering Wheel Freeplay*

- Perform all inspection items completely at the beginning of each week.
- Turn in the completed form to your supervisor after the inspection is completed.
- Make sure to note all body damage below and report it to your immediate supervisor.



Discrepancies:

Employee Signature: Supervisor Signature: Date:

VEHICLE MUST BE REFILLED AT OR BEFORE FUEL GAUGE REACHES ONE-QUARTER TANK.