



Vehicle Inspection Report

(to drive on school-sponsored field trips)

Vehicle Owner:			
Inspection Completed By:			Date:
Vehicle Make:	Model:	Year:	Plate No.:
Beginning Mileage:		Ending Mileage:	

Not Ok	OK	Before Starting Engine	Not Ok	OK	After Starting Engine
		Body			Brakes
		Brake / head / tail / clearance lights			Parking Brake
		Direction Signals			Drive train
		Emergency flashers (4-way)			Gauges (oil/fuel/temp/air)
		Glass/ mirrors (inside & outside)			Heater / defroster / air conditioner
		Wheels and tires			Speedometer
		- Air pressure to manufacturer's recomm.			Steering
		- Minimum of 1/8 inch tread depth			Transmission
		- No visible sign of tire deterioration	Checked for open safety recalls:		
		Windshield wipers and washers	Remarks:		
		Horn			
		Seat belts all seating positions			
		Seats securely fastened to the floor			
		Battery			
		Belts			
		Fluid levels / leaks			
		Muffler & exhaust system			
		Suspension System			
		Other			

Condition of above vehicle is: _____ **Satisfactory** _____ **Unsatisfactory**

Driver's Signature: _____

Date: _____

Inspector's Signature: _____

Date: _____