



Motor Carrier Attachment

DVIR's January 11 to January 30 by Accident Driver

Crozet, Virginia January 31, 2018

HWY18MH005

(9 pages)

Day's Date _____

Daily Vehicle Inspection Report

TIME DISPOSAL TRASH

Starting Miles <u>10,580</u>	Truck # <u>12</u>	Ending Miles <u>10,631</u>
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Item	OUTBOUND		INBOUND		N/A
	OK	Needs Repair	OK	Needs Repair	
(See back for details.)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Component (Fluid levels, belts, water pump, etc.)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
(See back for details.)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
(all)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
(all)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Tread depth: 4/32" front; 2/32" rear; inflation, etc.)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Windshield Wipes, Windshield	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Side Mirrors (Not: broken, loose)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Lighting Devices (pintal hook and safety chains in place)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Tires and rims (No: damage, loose nuts, welds or rust, etc.)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Safety Equipment (fuses, reflectors, fire extinguisher)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Start (See back for details.)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Oil (See back for details.)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Drive Shaft (Not: loose, cracked)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Repairs Needed Vehicle Safe to Operate	Certified By	Date
Time <u>6:00</u>	<input checked="" type="checkbox"/> A.M. <input type="checkbox"/> P.M. Outbound Driver's Signature <u>[Signature]</u>	Date <u>11-18</u>
Time <u>3:00</u>	<input type="checkbox"/> A.M. <input checked="" type="checkbox"/> P.M. Inbound Driver's Signature <u>[Signature]</u>	Date <u>11-18</u>

Day's Date: _____

Daily Vehicle Inspection Report

TIME DISPOSAL TRASH

Starting Miles 10,630	Truck # 12	Ending Miles 10,760
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Item	OUTBOUND		INBOUND		N/A
	OK	Needs Repair	OK	Needs Repair	
(See back for details.)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Compartment (Fluid levels, belts, water pump, wiper)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Engine (See back for details.)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
(all)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Wheels (all)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Tread depth: 4/32" front; 2/32" rear; inflation, pressure	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Windshield Wipes, Windshield	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Side Vision Mirrors (Not: broken, loose)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Lighting Devices (pintal hook and safety chains in place)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Tires and rims (No: damage, loose nuts, welds or rust, lug nuts)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Safety Equipment (fuses, reflectors, fire extinguisher)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Start (See back for details.)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Brake (See back for details.)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Udd Drive Shaft (Not: loose, cracked)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

No Repairs Needed Vehicle Safe to Operate	Certified By	Date
Time 5:00 <input checked="" type="checkbox"/> AM <input type="checkbox"/> PM	Outbound Driver's Signature <i>[Signature]</i>	Date 1-12-18
Time 2:45 <input type="checkbox"/> AM <input checked="" type="checkbox"/> PM	Inbound Driver's Signature <i>[Signature]</i>	Date 1-12-18

Day's Date _____

Daily Vehicle Inspection Report

TIME DISPOSAL TRASH

Starting Miles 10,760 Truck # 12 Ending Miles 10,852

Item	OUTBOUND		INBOUND		N/A
	OK	Needs Repair	OK	Needs Repair	
(See back for details.)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Compartment (Fluid levels, belts, water pump, motor)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
ing (See back for details.)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
(all)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
ors (all)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
(Tread depth: 4/32" front; 2/32" rear; inflation, etc)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
shield Wipes, Windshield	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
ision Mirrors (Not: broken, loose)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
ing Devices (pintal hook an safety chains in place)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
s and rims (No: damage, loose nuts, welds or rust, lug nuts)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
ncy Equipment (fuses, reflectors, fire extinguisher)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Start (See back for details.)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
ision (See back for details.)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
nd Drive Shaft (Not: loose, cracked)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

No Repairs Needed Vehicle Safe to Operate		Certified By		Date
Time <u>6:00</u>	<input checked="" type="checkbox"/> AM <input type="checkbox"/> PM	Outbound Driver's Signature <u>[Signature]</u>		Date <u>7-15-18</u>
Time <u>1:45</u>	<input type="checkbox"/> AM <input checked="" type="checkbox"/> PM	Inbound Driver's Signature <u>[Signature]</u>		Date <u>7-15-18</u>

Day's Date _____

Daily Vehicle Inspection Report

TIME DISPOSAL TRASH

Starting Miles <u>11069</u>	Truck #. <u>12</u>	Ending Miles <u>1190</u>
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Item	OUTBOUND		INBOUND		N/A
	OK	Needs Repair	OK	Needs Repair	
(See back for details.)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Compartment (Fluid levels, belts, water pump, motor)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
ing (See back for details.)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
s (all)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
ors (all)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
(Tread depth: 4/32" front; 2/32" rear; inflation, etc)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
ield Wipes, Windshield	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
ision Mirrors (Not: broken, loose)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
ng Devices (pintal hook an safety chains in place)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
and rims (No: damage, loose nuts, welds or rust, lug)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
cy Equipment (fuses, reflectors, fire extinguisher)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Start (See back for details.)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
ion (See back for details.)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
id Drive Shaft (Not: loose, cracked)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

6 Repairs Needed Vehicle Safe to Operate	Certified By	Date
Time <u>6:00</u> <input type="checkbox"/> AM <input type="checkbox"/> PM	Outbound Driver's Signature <u>Jane Taylor</u>	Date <u>1-25-18</u>
Time <u>3:10</u> <input type="checkbox"/> AM <input checked="" type="checkbox"/> PM	Inbound Driver's Signature <u>Dana K...</u>	Date <u>1-25-18</u>

Day's Date _____

Daily Vehicle Inspection Report

TIME DISPOSAL TRASH

Starting Miles <u>11,194</u>	Truck # <u>12</u>	Ending Miles <u>11,326</u>
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Item	OUTBOUND		INBOUND		N/A
	OK	Needs Repair	OK	Needs Repair	
(See back for details.)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Compartment (Fluid levels, belts, water pump, motor)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
ing (See back for details.)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
s (all)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
ors (all)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
(Tread depth: 4/32" front; 2/32" rear; inflation, etc)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
ield Wipes, Windshield	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
ision Mirrors (Not: broken, loose)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
ng Devices (pintal hook an safety chains in place)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
and rims (No: damage, loose nuts, welds or rust, lug)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
ncy Equipment (fuses, reflectors, fire extinguisher)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Start (See back for details.)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
ion (See back for details.)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
id Drive Shaft (Not: loose, cracked)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

No Repairs Needed Vehicle Safe to Operate	Certified By	Date
Time <u>5:00</u> <input type="checkbox"/> AM <input type="checkbox"/> PM	Outbound Driver's Signature <u>[Signature]</u>	Date <u>1-26-18</u>
Time <u>2:30</u> <input type="checkbox"/> AM <input checked="" type="checkbox"/> PM	Inbound Driver's Signature <u>[Signature]</u>	Date <u>1-26-18</u>

Driver's Date _____

Daily Vehicle Inspection Report

TIME DISPOSAL TRASH

Starting Miles <u>11,376</u>	Truck # <u>12</u>	Ending Miles <u>11,415</u>
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Item	OUTBOUND		INBOUND		N/A
	OK	Needs Repair	OK	Needs Repair	
(See back for details.)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Compartment (Fluid levels, belts, water pump, motor)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
(See back for details.)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
(all)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
tires (all)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
tread depth: 4/32" front; 2/32" rear; inflation.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Wiper Wipes, Windshield	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Side Mirrors (Not: broken, loose)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Warning Devices (pintal hook and safety chains in place)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Wheels and rims (No: damage, loose nuts, welds or rust, lug nuts)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Electrical Equipment (fuses, reflectors, fire extinguisher)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Brakes (See back for details.)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Steering (See back for details.)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Drive Shaft (Not: loose, cracked)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Repairs Needed Vehicle Safe to Operate	Certified By	Date
Time <u>6:00</u> <input type="checkbox"/> AM <input checked="" type="checkbox"/> PM	Outbound Driver's Signature <u>[Signature]</u>	Date <u>1-29-18</u>
Time <u>1:15</u> <input type="checkbox"/> AM <input checked="" type="checkbox"/> PM	Inbound Driver's Signature <u>[Signature]</u>	Date <u>1-29-18</u>

Today's Date _____

Daily Vehicle Inspection Report

TIME DISPOSAL TRASH



Location	Starting Miles <u>11,415</u>	Truck # <u>12</u>	Ending Miles <u>11,528</u>
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Item	OUTBOUND		INBOUND		N/A
	OK	Needs Repair	OK	Needs Repair	
Brakes (See back for details)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Engine Compartment (Fluid levels, belts, water pump, compressor)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Steering (See back for details)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Lights (all)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Reflectors (all)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Tires (Tread depth 4/32" front, 2/32" rear, inflation, damage)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Horn	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Windshield Wipes, Windshield	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Rear Vision Mirrors (Not broken, loose)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Coupling Devices (pintal hook and safety chains in place)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Wheels and rims (No damage, loose nuts, welds or rust, missing lugs)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Emergency Equipment (fuses, reflectors, fire extinguisher)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Engine Start (See back for details)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Suspension (See back for details)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Frame and Drive Shaft (Not loose, cracked)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

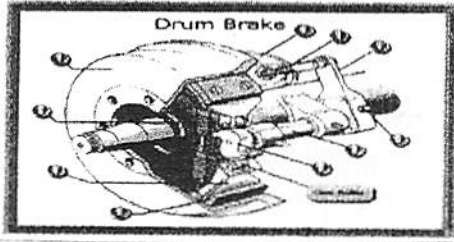
Remarks _____

<input type="checkbox"/> No Repairs Needed Vehicle Safe to Operate	Certified By	Date
Time <u>6:00</u> <input type="checkbox"/> AM <input type="checkbox"/> PM	Outbound Driver's Signature <u>[Signature]</u>	Date <u>1-30-18</u>
Time <u>2:15</u> <input type="checkbox"/> AM <input type="checkbox"/> PM	Inbound Driver's Signature <u>[Signature]</u>	Date <u>1-30-18</u>

ITEM

INSEPTION EXPLANATION

Brakes



Slack Adjusters should not travel more than 2" after application of brake and they should not be broken

Air Hoses should not be cracked, worn or frayed.

Brake Chambers should be tightly mounted, not cracked or severely dented. Air should not leak when brakes are applied.

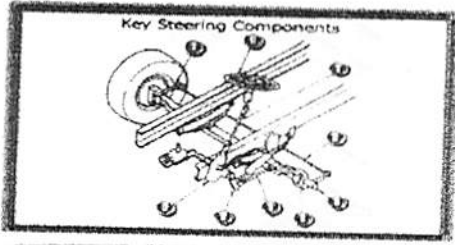
Air Pressure Warning Buzzer and Light should operate when the PSI is under 60. If PSI is over 60, pump the brake to reduce.

Air Pressure Level should not drop more that 2 PSI per minute on single vehicles, and 3 PSI for combination vehicles. If brakes are pressed, the PSI should not drop more than 3 on single vehicle and 4 on combination vehicles.

Parking Brake should hold the truck when it is in gear and the accelerator is lightly pressed.

Air Tanks should not be loose or missing bolts (if there is a manual valve, the tank should be drained daily.)

Steering System



Steering Gear Box should be tightly mounted – no missing bolts, nuts or cotter keys

Tie Rod, Steering Column, Pitman Arm and Drag Link should not be loose, bent or broken

Powers Steering Hoses should not be cracked or leaking.

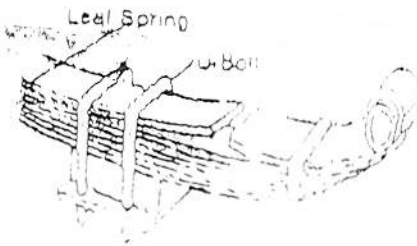
Steering Wheel should not have more than 2" of play in either direction when the engine is on

Engine Start

Clutch and gear shift should be tested to ensure that each gear can be engaged.

Check all gauges to ensure they do not indicate a problem. Oil pressure should be above 15, air pressure should be above 110, voltmeter should indicate 13-15 volts, and the temperature should be around 190 degrees. (Ensure the heater and defroster are operating.)

Suspension



Spring hangers and Leaf Springs should not be broken, cracked or loose.

Shock Absorbers should not be leaking, broken or missing bolts.

Frame and Drive Shaft should not be loose, crooked, bent or broken.

