

**ITEMS TO BE CHECKED DAILY (Continued)**

	Check			All Checks Performed (Operator Signature)	Date
	B	D	A		
Horn	*	*			12
Lights (turn sig/reflectors)	*	*			13
Clean window glass	*		*		14
Steering		*			15
Brakes/clutch		*			16
Unusual noise during operations		*			17
Cargo mounted equipment	*		*		18
Exhaust System	*				19
Air Conditioner	*	*			20
					21
					22
					23
					24
					25
					26
					27
					28
					29
					30
					31

**B - Before**

**D - During**

**A - After**

**OPERATOR'S INSPECTION GUIDE AND TROUBLE REPORT** DATE (MO/YR)

**ADMINISTRATIVE VEHICLES (Less than 2 1/2 ton)**

Vehicle Type: \_\_\_\_\_

Bumper No.: \_\_\_\_\_

Odometer Readings: Beginning: \_\_\_\_\_ Ending: \_\_\_\_\_

Using Organization: \_\_\_\_\_

Location: \_\_\_\_\_

Vehicle Coordinating Officer's Name: \_\_\_\_\_

Grade: \_\_\_\_\_

Phone No.: \_\_\_\_\_

ITEMS TO BE CHECKED DAILY	Check			All Checks Performed (Operator Signature)	Date
	B	D	A		
Clean Vehicle (in/out)	*		*		1
Damage (in/out/missing items)	*	*	*		2
Tire inflation/spare/jack/lug wrench	*				3
Fuel/oil/coolant (levels)	*				4
Lube/oil change (due date)	*				5
Leaks (fuel/oil/water)	*	*	*		6
Battery (cleanliness/fluid level)	*				7
Drive Belts/Pulleys/Fan	*				8
Safety devices (belts/warning lights/mirrors)	*	*	*		9
Instruments (amps/temp/speedometer/tach/oil pressure)	*	*	*		10
Windshield wipers/arms/washers)	*	*	*		11

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