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| **VEHICLE PRE-USE CHECKLIST WEEK OF: \_\_\_\_\_\_\_\_\_\_\_\_\_\_**   |  |  | | --- | --- | | **Vehicle license plate:** |  | | **Vehicle mileage:** |  | | **Vehicle type/make:** |  | | **Operator:** |  |   **Mark each item as:**  **√ =** satisfactory/available, **X** = defective/ missing, **N/A** = not applicable | | | | |  |  |
| **External Vehicle Conditions** | **Mon** | **Tue** | **Wed** | **Thu** | **Fri** | **Comments/ Observations** |
| Condition of vehicle bodywork, windshield, windows, lights |  |  |  |  |  |  |
| Condition of windshield wiper blades |  |  |  |  |  |  |
| Cleanness of windshield, windows, mirrors, lights, license plate |  |  |  |  |  |  |
| Security of load, trailer, roof-rack |  |  |  |  |  |  |
| Condition of tires, tire pressure, tire wear |  |  |  |  |  |  |
| Availability of spare wheel & jack |  |  |  |  |  |  |
| **Fluids** | **Mon** | **Tue** | **Wed** | **Thu** | **Fri** | **Comments/ Observations** |
| Engine oil level |  |  |  |  |  |  |
| Coolant level |  |  |  |  |  |  |
| Windshield washer level |  |  |  |  |  |  |
| Brake/clutch fluid |  |  |  |  |  |  |
| Power steering fluid |  |  |  |  |  |  |
| Condition of battery |  |  |  |  |  |  |
| Oil or water leaks |  |  |  |  |  |  |

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| **Vehicle Interior and Equipment** | **Mon** | **Tue** | **Wed** | **Thu** | **Fri** | **Comments/ Observations** |
| Condition & function of seat belts |  |  |  |  |  |  |
| Head restraint adjustment |  |  |  |  |  |  |
| Mirror adjustment |  |  |  |  |  |  |
| First aid kit available and stocked |  |  |  |  |  |  |
| Fire extinguisher available and inspected |  |  |  |  |  |  |
| Flashlight |  |  |  |  |  |  |
| Warning triangle |  |  |  |  |  |  |
| Vehicle handbook |  |  |  |  |  |  |
| Insurance & registration |  |  |  |  |  |  |
| Winter survival kit |  |  |  |  |  |  |
| **Function Checks before Starting the Journey** | **Mon** | **Tue** | **Wed** | **Thu** | **Fri** | **Comments/ Observations** |
| Instrument warning lights |  |  |  |  |  |  |
| Exterior lights |  |  |  |  |  |  |
| Horn |  |  |  |  |  |  |
| Washer & wipers |  |  |  |  |  |  |
| Brake |  |  |  |  |  |  |
| Fuel |  |  |  |  |  |  |
| *This checklist must be kept on file.*  Deficiencies corrected by:  Name Date | | | | | | |
| **ALL THE ITEMS ABOVE HAVE BEEN CHECKED AND ANY DEFECTS AND OMISSIONS REPORTED.** |  |  |  |  |  |  |
| Operator Name |  | Operator Signature | | |  |  |

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| --- | --- | --- |
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| Senior Manager Name |  | Senior Manager Signature |