

VEHICLE INSPECTION SHEET

RECORD OF DAILY INSPECTION: Vehicle Rego: _____							
Odometer Reading (Start): _____ Odometer Reading (End): _____							
	MON / /	TUE / /	WED / /	THUR / /	FRI / /	SAT / /	SUN / /
Name of Driver							
Check Oil & Water							
Check Fuel Level as Required							
Check steering, horn & turn indicators							
Check brakes, brake lights and tyre pressure							
Check mirror settings							
Check passenger doors and any other external doors and hatches							
Any damage to windshield wheels, tyres, lights or signs?							
Is Vehicle Clean?							
Recorded faults in Workshop fault book?							
Driver initials							
Date that faults were rectified							
Repairer's Name and Initials of Operator or Service Supervisor							
Additional Checks Required by Operator							
Odometer end							
Odometer start							
Distance travelled							
Quantity of fuel purchased							