



Passenger Van Pre-Trip Inspection Report

Driver Name:	Vehicle #:	Date:
--------------	------------	-------

Beginning mileage:	Fuel: $\frac{1}{4}$ $\frac{1}{2}$ $\frac{3}{4}$ Full	Passenger list: Yes
Ending mileage:	$\frac{1}{4}$ $\frac{1}{2}$ $\frac{3}{4}$ Full	No

Walk around / visual inspection:

- Leaks under front end
- Clear of pedestrians / objects around the van
- Body damage (mark on photograph on right)
- Tire tread (minimum 4/32") and pressure
- Windows / mirrors (clean, not cracked/busted)

Under hood inspection:

<p>Fluids</p> <ul style="list-style-type: none"> <input type="checkbox"/> Oil <input type="checkbox"/> Transmission <input type="checkbox"/> Power steering <input type="checkbox"/> Brake <input type="checkbox"/> Coolant <input type="checkbox"/> Washer 	<p>Other:</p> <ul style="list-style-type: none"> <input type="checkbox"/> Belts <input type="checkbox"/> Hoses <input type="checkbox"/> Wires <input type="checkbox"/> Battery
--	---

Interior:

- Seating
- Seatbelts
- Mirror adjustments

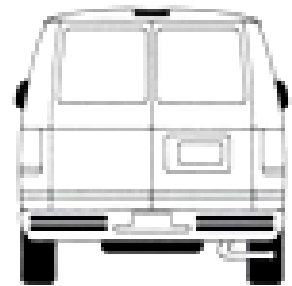
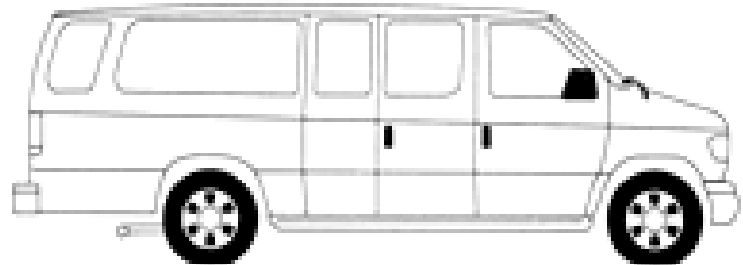
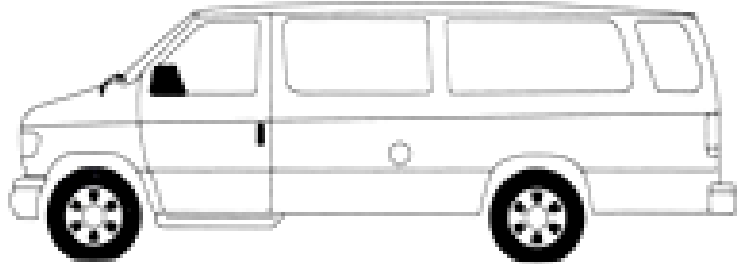
Emergency Equipment

- Fire extinguisher (rating, charge, full, secure)
- reflective triangles
- Spare fuses

Start Up Inspection;

<ul style="list-style-type: none"> <input type="checkbox"/> Warning lights <input type="checkbox"/> Gauges working properly <input type="checkbox"/> Lights / turn signals <input type="checkbox"/> Heater / Defroster 	<p><u>Brake check</u></p> <ul style="list-style-type: none"> <input type="checkbox"/> Service <input type="checkbox"/> Parking
--	---

Walk around visual inspection:
 Mark all damage as found during your walk around / visual inspection.



Do not operate the van if there is any safety and / or operational deficiencies. The van should be taken out of service until safety repairs are completed.