

# ANNUAL VEHICLE SAFETY INSPECTION CHECKLIST

**Directions:** Organizational vehicles are required to have annual safety inspections performed by a licensed mechanic. Use your service center's checklist or the generic list below. The inspection must contain brake readings and tire tread depth. At the time of the inspection you may request regular scheduled maintenance or other mechanical needs. Return this inspection form to the organizational Safety Manager.

**VEHICLE /FACILITY INFORMATION:**

Vehicle license number: \_\_\_\_\_

Make/Year \_\_\_\_\_

Facility: \_\_\_\_\_

Mileage: \_\_\_\_\_

**SERVICE CENTER**

Inspection Date: \_\_\_\_\_

Name of Automotive Service Center: \_\_\_\_\_

Street Address: \_\_\_\_\_

City: \_\_\_\_\_

Phone Number: \_\_\_\_\_

Name of Service Representative: \_\_\_\_\_

Check Appropriate Box and Comments:

OK	Needs Attention		OK	Needs Attention	
		Check battery performance/cables			Check wipers and washer
		Check belts and hoses			Check gauges and dash lights
		Check carburetor mount/choke			Check heater and defroster
		Check drive train and U-joints			Check horn
		Check exhaust system leaks			Check jack, wrench, spare tire
		Check parking brake			Check lights and signals
		Check starter safety switch			Check mirrors.
		Check anti-freeze level _____deg			Check for broken glass
		Check fluids (brake, trans, etc)			Check fuel tank and lines
		Check manifold heat valve			Check seat belts
		Check steering and linkage			Check shock absorbers
		Check motor/transmission mounts			Check suspension
		Check tire wear/damage: LF _____ RF _____ LR _____ RR _____ (OK or Requires Attention)			Check brakes: LF _____ % remaining RF _____ % remaining LR _____ % remaining RR _____ % remaining
		Check tire thread depth: LF _____ RF _____ LR _____ RR _____ (Must be greater than 6/32)			Check tire pressure PSI: LF _____ RF _____ LR _____ RR _____ (Pressure set to factory recommendation)