

ANNUAL VEHICLE INSPECTION

INSPECTION POINT	PASS	FAIL
1 Foot brakes	<input type="checkbox"/>	<input type="checkbox"/>
Min. pad/shoe thickness per manufacturer _____		
Right front Measurements _____		
Left front Measurements _____		
Right rear Measurements _____		
Left rear Measurements _____		
2 Emergency brake (parking brake)	<input type="checkbox"/>	<input type="checkbox"/>
3 Steering mechanism	<input type="checkbox"/>	<input type="checkbox"/>
Ball joints <input type="checkbox"/> <input type="checkbox"/>		
Tie rods <input type="checkbox"/> <input type="checkbox"/>		
Rack & pinion <input type="checkbox"/> <input type="checkbox"/>		
Bushings <input type="checkbox"/> <input type="checkbox"/>		
4 Windshield	<input type="checkbox"/>	<input type="checkbox"/>
Large crack <input type="checkbox"/> <input type="checkbox"/>		
Small crack <input type="checkbox"/> <input type="checkbox"/>		
5 Rear window and other glass	<input type="checkbox"/>	<input type="checkbox"/>
6 Windshield wipers	<input type="checkbox"/>	<input type="checkbox"/>
7 Headlights	<input type="checkbox"/>	<input type="checkbox"/>
8 Tail lights	<input type="checkbox"/>	<input type="checkbox"/>

INSPECTION POINT	PASS	FAIL
9 Turn indicator lights	<input type="checkbox"/>	<input type="checkbox"/>
10 Stop Lights	<input type="checkbox"/>	<input type="checkbox"/>
11 Front seat adjustment	<input type="checkbox"/>	<input type="checkbox"/>
12 Doors (open, close, lock)	<input type="checkbox"/>	<input type="checkbox"/>
13 Horn	<input type="checkbox"/>	<input type="checkbox"/>
14 Speedometer	<input type="checkbox"/>	<input type="checkbox"/>
15 Bumpers	<input type="checkbox"/>	<input type="checkbox"/>
16 Muffler and exhaust system	<input type="checkbox"/>	<input type="checkbox"/>
17 Tires, incl. tread depth	<input type="checkbox"/>	<input type="checkbox"/>
Right front [32nd's / In] _____		
Left front [32nd's / In] _____		
Right rear [32nd's / In] _____		
Left rear [32nd's / In] _____		
18 Interior and exterior rear view mirrors	<input type="checkbox"/>	<input type="checkbox"/>
19 Safety belts for driver and passanger(s)	<input type="checkbox"/>	<input type="checkbox"/>

VEHICLE INSPECTION	PASS	FAIL
(Please circle)	<input type="checkbox"/>	<input type="checkbox"/>
Must pass all inspection points to pass vehicle inspection		

PARTNER NAME EMAIL ADDRESS

PARTNER SIGNATURE PARTNER PHONE NUMBER DATE

TO BE COMPLETED BY INSPECTOR

COMPANY VEHICLE MILEAGE

LICENSE PLATE # VIN#

VEHICLE MAKE VEHICLE MODEL VEHICLE YEAR

ADDRESS

INSPECTOR NAME INSPECTOR SIGNATURE INSPECTION DATE