Company Car Pre-Trip Inspection Record

Date:

_____

Driver Name:

_____

Vehicle Make/Model:

_____

License Plate:

_____

Inspection Item	OK	Needs Attention	Comments
Tires (pressure, tread, damage)	☐	☐	
Brakes	☐	☐	
Headlights/Tail lights	☐	☐	
Turn Signals/Hazards	☐	☐	
Windshield/Wipers/Washer Fluid	☐	☐	
Mirrors	☐	☐	
Horn	☐	☐	
Seat Belts	☐	☐	
Oil Level	☐	☐	
Coolant Level	☐	☐	

Inspection Item	OK	Needs Attention	Comments
Exterior Condition (dents, damage)	☐	☐	

Additional Notes/Issues:

Inspector's Name:

Signature:

Inspection Item	OK	Needs Attention	Comments
Exterior Condition (dents, damage)	☐	☐	